



Defense Research, Surveys, and Statistics Center (RSSC)

2014 Survivor Experience Survey

Report on Preliminary Results
Fiscal Year 2014, Quarter 4



REPORT DOCUMENTATION PAGE					Form Approved OMB No. 0704-0188	
<p>The public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (O704-0188), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.</p> <p>PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ADDRESS.</p>						
1. REPORT DATE (DD-MM-YYYY) 12/01/2014		2. REPORT TYPE Final Report		3. DATES COVERED (From - To) June 4-Sept 22, 2014		
4. TITLE AND SUBTITLE 2014 Survivor Experience Survey: Report on Preliminary Results Fiscal Year 2014, Quarter 4			5a. CONTRACT NUMBER 5b. GRANT NUMBER 5c. PROGRAM ELEMENT NUMBER			
6. AUTHOR(S) Dr. Elizabeth P. Van Winkle, Dr. Lindsay Rock, Margaret H. Coffey, and Dr. Maia Hurley			5d. PROJECT NUMBER 5e. TASK NUMBER 5f. WORK UNIT NUMBER			
			7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) Defense Manpower Data Center 4800 Mark Center Drive Suite 04E25 Alexandria, VA 22350-4000			
			8. PERFORMING ORGANIZATION REPORT NUMBER 2014-037			
9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(ES) Department of Defense Sexual Assault Prevention and Response Office 4800 Mark Center Drive Suite 07G21 Alexandria, VA 22350-4000			10. SPONSOR/MONITOR'S ACRONYM(S) 11. SPONSOR/MONITOR'S REPORT NUMBER(S)			
12. DISTRIBUTION/AVAILABILITY STATEMENT Approved for public release; distribution unlimited						
13. SUPPLEMENTARY NOTES						
14. ABSTRACT This survey was conducted in response to a Secretary of Defense Directive requiring a standardized and voluntary survey for survivors be developed and regularly administered to "provide the sexual assault victim/survivor the opportunity to assess and provide feedback on their experiences with SAPR victim assistance, the military health system, the military justice process, and other areas of support" (Secretary of Defense, 2014). The Defense Research, Surveys, and Statistics Center (RSSC) within the Defense Manpower Data Center (DMDC; DMDC-RSSC) was tasked with this effort. The SES was developed as an ongoing survey to provide details related to the sexual assault survivor's overall reporting process and reporting experience and address areas that were of specific interest to the Department, including: awareness of SAPR resources and reporting options, use of and satisfaction with SAPR personnel (including Sexual Assault Response Coordinators [SARCs], Uniformed Victims' Advocates/Victims' Advocates [UVAs/VAs], and legal personnel), use of and satisfaction with SAPR-related medical and mental health services, and leadership responses to sexual assault reports .						
15. SUBJECT TERMS Sexual Assault Prevention and Response Resources, Sexual Assault Response Coordinators, Uniformed Victims' Advocates/Victims' Advocates, Special Victims' Counsel/Victims' Legal Counsel, Restricted Report, Unrestricted Report, Chain of Command, Medical Services, Mental Health Services, Chaplain						
16. SECURITY CLASSIFICATION OF: a. REPORT UU		17. LIMITATION OF ABSTRACT b. ABSTRACT UU c. THIS PAGE UU		18. NUMBER OF PAGES 122	19a. NAME OF RESPONSIBLE PERSON Dr. Elizabeth P. Van Winkle 19b. TELEPHONE NUMBER (Include area code) 521-372-0984	

Additional copies of this report may be obtained from:

Defense Technical Information Center

ATTN: DTIC-BRR

8725 John J. Kingman Rd., Suite #0944

Ft. Belvoir, VA 22060-6218

Or from:

<http://www.dtic.mil/dtic/order.html>

Ask for report by ADA610602

**2014 SURVIVOR EXPERIENCE SURVEY
REPORT ON PRELIMINARY RESULTS
FISCAL YEAR 2014, QUARTER 4**

**Dr. Elizabeth P. Van Winkle, Dr. Lindsay Rock, Ms. Margaret H. Coffey, and Dr. Maia Hurley
Defense Manpower Data Center**

**Defense Manpower Data Center
Defense Research, Surveys, and Statistics Center
4800 Mark Center Drive, Suite 04E25-01, Alexandria, VA 22350-4000**

Acknowledgments

The Defense Manpower Data Center (DMDC) is indebted to numerous people for their assistance with the *2014 Survivor Experience Survey (2014 SES)*, which was conducted on behalf of Major General Jeffrey Snow, Director, DoD Sexual Assault Prevention and Response Office (SAPRO). The survey is conducted under the leadership of Dr. Paul Rosenfeld, Acting Director of the *Defense Research, Surveys, and Statistics Center (RSSC)*.

DoD Sexual Assault Prevention and Response Office officials contributing to the development and administration of this assessment include Dr. Nathan Galbreath and Dr. Allison Greene-Sands. Service/National Guard officials contributing to the development and administration of this assessment include Dr. Paul Garst (Department of Navy SAPRO), Mr. Paul Rosen (Navy), Dr. Maryam Allahyar (Army), Dr. Lauren Boyatzi and Major Shontre McFarlin (Air Force), Ms. Melissa Cohen (Marine Corps), and Ms. Jane Lux and Colonel Rita Whitmire (National Guard).

DMDC's Survey Design, Analysis, & Operations Branch, under the guidance of Dr. Elizabeth P. Van Winkle, Deputy Branch Chief, is responsible for the development and analysis of this survey. The lead survey design analyst is Dr. Lindsay Rock. She and Ms. Margaret Coffey designed the unique presentation of complex items used in this report. Ms. Carol Newell, Team Lead of Survey Operations, is responsible for the survey database construction and archiving. The lead operations analyst on this survey was Ms. Margaret Coffey, who used DMDC's Statistical Analysis Macros to calculate the estimates presented in this report.

Mr. David McGrath, Branch Chief of the Statistical Methods Branch, and Dr. Fawzi Al Nassir, SRA International, Inc., provided statistical consultation on this project.

A team consisting of Ms. Margaret Coffey; Dr. Lindsay Rock; Dr. Elizabeth P. Van Winkle; Dr. Abigail Moore and Ms. Natalie Namrow, SRA International, Inc.; and Dr. Maia Hurley completed quality control for this report.

The results of this report would not be possible without the courage of the survivors who shared their opinions and experiences with us.

2014 SURVIVOR EXPERIENCE SURVEY: PRELIMINARY RESULTS

Executive Summary

The Department of Defense (DoD) is strongly committed to providing Sexual Assault Prevention and Response (SAPR) resources and services to all military members who experience sexual assault. The *Survivor Experience Survey (SES)* is the first DoD-wide survey effort designed to assess the use and effectiveness of the sexual assault services and resources that military survivors of sexual assault receive. This report for the *2014 SES* is based on preliminary findings from Quarter 4 of fiscal year 2014 (FY2014). As the survey does not encompass the full fiscal year, these findings are preliminary in nature, but nonetheless provide information on an important population which is of great interest to the Department.

This overview report discusses preliminary findings from the *2014 SES*, which includes data collected from June 4, 2014 to September 22, 2014. This survey was conducted in response to a Secretary of Defense Directive requiring a standardized and voluntary survey for survivors be developed and regularly administered to “provide the sexual assault victim/survivor the opportunity to assess and provide feedback on their experiences with SAPR victim assistance, the military health system, the military justice process, and other areas of support” (Secretary of Defense, 2014). The Defense Research, Surveys, and Statistics Center (RSSC)¹ within the Defense Manpower Data Center (DMDC; DMDC-RSSC) was tasked with this effort. For over 25 years, RSSC has been DoD's lead organization for conducting impartial and unbiased scientific survey and focus group research on a number of topics of interest to the Department.

The *SES* was developed as an ongoing survey to provide details related to the sexual assault survivor's overall reporting process and reporting experience and address areas that were of specific interest to the Department, including: awareness of SAPR resources and reporting options, use of and satisfaction with SAPR personnel (including Sexual Assault Response Coordinators [SARCs], Uniformed Victims' Advocates/Victims' Advocates [UVAs/VAs], and legal personnel), use of and satisfaction with SAPR-related medical and mental health services, and leadership responses to sexual assault reports.² This Executive Summary focuses on top-line results in these targeted areas; additional topics and analyses on other areas of interest to the Department are included in the full report.

Survey Methodology

The goal of the *SES* is to learn about the overall reporting experiences from all current uniformed military members, 18 years of age or older, who made a restricted/unrestricted report

¹ Prior to 2014, RSSC was called Human Resources Strategic Assessment Program (HRSAP). In 2014, DMDC reorganized and renamed the RSSC to better encapsulate the scope of research conducted by this group.

² This survey and items included in it align with two of the “Lines of Effort (LoE)” in the DoD Sexual Assault Prevention and Response Office's Strategic Plan. LoE 4, “Advocacy/Victim Response” addresses victim support, response, and reporting options. The goal of this LoE is to ensure there are trained people in place to respond and care for sexual assault survivors. LoE 5, “Assessment” includes a standardized data collection effort that measures, analyzes, assesses, and can be used to report program progress. The goal of this LoE is to ensure the DoD's sexual assault prevention and response programs are working effectively.

for any form of sexual assault, and made their report at least 30 days ago, but after 1 October 2013.³ The *SES* fielded at the latter end of FY2014 in order to capture preliminary findings from those eligible survivors who were receiving services. This data is included in this *2014 SES* report. As this survey is ongoing, data will continue to be collected and reported out by fiscal year.

Results are presented in this report at the Total DoD level. Survey items were constructed to be Service-specific so as to match the experience of the survivor. Appendix B includes the specific language presented for each Service.

The *SES* is the first survey of sexual assault survivors conducted across all DoD components including active duty, Reserves, and National Guard. DMDC-RSSC worked closely with the representatives from DoD SAPRO and across all Services/National Guard SAPR programs to determine the best way to conduct the survey, balancing the collection of the data with maintaining respect for the sexual assault survivor's privacy. With these issues in mind, it was determined that the *SES* would be an anonymous survey, providing sexual assault survivors maximum protection against privacy concerns, and would include no direct contact with the survivor, nor an ability to "track" or determine the survivor's identity. The challenge, given the limitations noted above, was how best to contact survivors to notify them of this survey effort while considering the privacy of the survivor. Contact with potential respondents was done primarily through SARCs, with additional support from UVAs/VAs and Special Victims' Legal Counsels/Victims' Legal Counsels (SVC/VLC). These providers are considered familiar or "safe" individuals for sexual assault survivors.

Survey anonymity was achieved through a two-stage selection process. First, DMDC-RSSC was provided a list of SARCs for each Service (includes active duty and Reserve) and National Guard. Second, SARCs contacted their clients, informed them of the survey, and assigned them a unique survey access ticket number. For each survivor, ticket numbers were randomly generated by the Ticket Assignment Site; ticket numbers were not linked to any identifying information. Tickets were assigned to ensure only eligible respondents had access to the survey.

The survey administration process for the *2014 SES* began on June 4, 2014 with the email of an announcement message to Service (includes active duty and Reserve) and National Guard SARCs. SARCs have direct access to the majority of eligible survey participants; therefore they were used as the primary agent for contacting sexual assault survivors. Subsequent messages were sent to SARCs that provided instructions on how and when to provide the survey participant communication (e.g. why the survey was being conducted, how anonymity would be protected, why participation was important), as well as how to generate ticket numbers for survivors. Additional messages were sent to UVAs/VAs and SVC/VLC to recruit their assistance in notifying eligible survivors about the survey effort and steps to obtain a ticket number without requiring contact with a SARC.

³ The original timeframe was at least 30 days ago, but after 1 February 2014. On 17 July 2014, this timeframe was modified to at least 30 days ago, but the timeframe to make a report was extended to anytime after *October 2013*.

The data detailed in this report are from both unrestricted and restricted reporters, offering the Department a preliminary look at how military sexual assault survivors are experiencing the SAPR process. Although the *SES* is available to all sexual assault survivors who meet eligibility criteria, it is not designed to be a scientifically sampled survey. The contact strategies used to select and reach out to sexual assault survivors limit DMDC-RSSC from employing typical stratified random sampling and weighting procedures. Therefore, data presented from the *2014 SES* are not generalizable to all military sexual assault survivors and represent only the views of survivors who took the survey.

Results in this report are presented at the Total DoD level; however, Chapter 1 shows the number of respondents for the *2014 SES* broken out by individual reporting categories.

Overall, from June 4, 2014 to September 22, 2014, the *2014 SES* had 782 new tickets generated.⁴ Of the 782 tickets generated, there were 151 completed surveys which inform the preliminary findings from the *2014 SES*.

Background on Reporting Information

Respondents were asked to provide information on their awareness of SAPR resources prior to his/her sexual assault as well as details on who the respondent first told about the sexual assault, whether the respondent was advised to contact a SARC or a UVA/VA (Q8), and details regarding the initial report. Results are presented for survey respondents at the Total DoD level. Additional details on these findings are included in Chapter 2 of this report.

Awareness of Resources

The majority of respondents were aware of the resources DoD SAPRO offers sexual assault survivors.⁵

- More than three-quarters of respondents indicated that prior to the assault, they were aware of *SARCs* (82%), *chaplain services to survivors of sexual assault* (80%), *medical care to survivors of sexual assault* (78%), *UVAs/VAs* (78%), and *mental health counseling/care for survivors of sexual assault* (77%).
- Approximately half of respondents indicated that prior to the assault, they were aware of *Sexual Assault Forensic Examinations* (62%), the *DoD Safe Helpline* (54%), and their *installation 24-hour helpline* (49%).
- About one-third of respondents indicated that prior to the assault, they were aware of the *local civilian 24-hour helpline* (33%) and *Special Victims' Counsel or Victims' Legal Counsel* (29%).⁶

⁴ There were an additional 31 tickets that were regenerated. As these represent duplications, they do not count towards ticket totals.

⁵ As survey eligibility was based on the timeframe of the report, not the timeframe of the assault, some sexual assault resources may not have been available to a survivor at the time of his/her sexual assault. Data presented excludes those who indicated a resource did not exist at the time of the assault.

Overall Interactions With Sexual Assault Resources

Although the majority of respondents made a report to a SARC or UVA/VA, throughout the process they often interact with a variety of resources and providers available to them.

- The vast majority of respondents (99%) indicated they interacted with a SARC and/or a UVA/VA (*SARC* 95% and *UVA/VA* 82%) as a result of the sexual assault.
- More than two-thirds of respondents indicated, as a result of the assault, they spoke to a *mental health provider* (71%) and *Special Victims' Counsel/Victims' Legal Counsel* (68%).
- Approximately half of respondents (49%) indicated they interacted with a *medical provider*.
- Less than one-third of respondents (31%) indicated they interacted with a *chaplain* as a result of the assault.
- For those respondents who made an unrestricted report, about two-thirds indicated, as a result of the assault, they spoke to their *immediate supervisor* (66%), their *senior enlisted advisor* (65%), or their *unit commander/director* (64%).

Experiences and Satisfaction With Sexual Assault Response Coordinators or Unit Victims' Advocates/Victims' Advocates

Respondents who indicated they spoke to/interacted with a SARC or a UVA/VA as a result of the sexual assault were asked about their satisfaction with these resources. The Department offers survivors of sexual assault assistance and services from SARCs and Unit Victims' Advocates/Victims' Advocates (UVAs/VAs).⁷ Results are presented for survey respondents at the Total DoD level. Additional details on these findings are included in Chapter 3 of this report.

Experiences With the SARC

Of the 95% of respondents who interacted with a SARC:

- The majority of respondents *agreed* their SARC *treated them professionally* (96%), *thoroughly answered their questions* (95%), *supported them and listened to them without judgment* (both 94%), *did not rush them to make decisions* (91%), and *advocated on their behalf when needed* (89%).
 - Across these items, fewer respondents (between 1%-4%) indicated they *disagreed*.

⁶ This resource provides legal counsel for a military survivor of sexual assault and was established across DoD in 2013.

⁷ A survivor may interact with both a UVA and a VA in certain circumstances, including if the survivor makes an initial report to the UVA and the UVA refers him/her to the Installation VA.

Experiences With the UVA/VA

Of the 58% of respondents who interacted with a UVA:

- The majority of respondents *agreed* their UVA *treated them professionally* (93%), *supported them and listened to them without judgment* (both 92%), *did not rush them to make decisions* (88%), *thoroughly answered their questions* (86%), and *advocated on their behalf when needed* (84%).
 - Across these items, fewer respondents (between 4%-9%) indicated they *disagreed*.

Of the 27% of respondents who interacted with a VA:

- The majority of respondents *agreed* their VA *treated them professionally* and *supported them* (both 92%); *listened to them without judgment, thoroughly answered their questions*, and *advocated on their behalf when needed* (all 90%); and *did not rush them to make decisions* (87%).
 - Across these items, fewer respondents (between 3%-8%) indicated they *disagreed*.

Extent of Assistance Provided by the SARC or UVA/VA. Of the 99% of respondents who used a SARC or a UVA/VA:

- More than half indicated, to a *large extent*, that the SARC or UVA/VA assisted them with *referral to other services* (62%), *managing other services and concerns related to sexual assault* (61%), *keeping them informed throughout the process* (59%), *follow-up services or case status* (58%), and *dealing with mental health services* (56%).
 - Between 15%-20% indicated they were assisted to a *moderate extent*, between 9%-14% indicated they were assisted to a *small extent*, and between 10%-13% indicated they were *not at all assisted*.

Extent of Assistance Provided by the SARC or the UVA/VA for Unrestricted Reporters.

Some survey items may be relevant for all respondents, but applicable only to unrestricted reporters by policy. For these items, we present results for unrestricted reporters only.

Of the respondents who made an unrestricted report, 99% used a SARC or a UVA/VA:

- More than half indicated, to a *large extent*, that the SARC or UVA/VA assisted them with *notifying command* (71%), *dealing with legal services* (61%), and *dealing with law enforcement* (58%).
 - Between 12%-25% indicated they were assisted to a *moderate extent*, between 5%-11% indicated they were assisted to a *small extent*, and between 9%-13% indicated they were *not at all assisted*.

Satisfaction With Services Provided by SARC and UVA/VAs. Overall, a large majority of survivors (between 84%-89%) were satisfied with the services they received from their SARC, UVA, and VA and would likely recommend other survivors meet with these individuals after experiencing a sexual assault.

- Of the 95% of respondents who interacted with a SARC, 89% indicated that overall they were *satisfied* with the services provided by the SARC, whereas 5% indicated they were *dissatisfied*. In addition, 91% indicated they would be *likely* to recommend another survivor meet with one, whereas 2% indicated they were *unlikely*.
- Of the 58% of respondents who interacted with a UVA, 84% indicated that overall they were *satisfied* with the services provided by the UVA, whereas 10% indicated they were *dissatisfied*.
- Of the 27% of respondents who interacted with a VA, 88% indicated that overall they were *satisfied* with the services provided by the VA, whereas 8% indicated they were *dissatisfied*.
- Of the 82% of respondents who interacted with a UVA or a VA, 83% indicated they would be *likely* to recommend another survivor meet with one, whereas 8% indicated they were *unlikely*.

Experiences and Satisfaction With Medical Care and Mental Health Services

Respondents of the SES are asked whether they used medical or mental health services as a result of the sexual assault. For those who have utilized services, the survey asks about their satisfaction with medical and mental health care providers and services. Results are presented in this summary only for members who received care at a military treatment facility. Chapter 4 includes results for all survey respondents regardless of where they received care (e.g., civilian and/or military facility). Results are presented for survey respondents at the Total DoD level. Additional details on these findings are included in Chapter 4 of this report.

Assessment of Medical Services for Sexual Assault

Of the 24%⁸ of respondents who received medical care at a military medical treatment facility:

- A large majority *agreed* the provider *maintained their confidentiality* (94%), *explained the steps in the exam to them* (90%), *supported them* (89%), *treated them professionally* (89%), *did not rush them to make decisions* (86%), *thoroughly answered their questions* (85%), *performed exams appropriate for the reason for their visit* (84%), and *listened to them without judgment* (80%).
 - Across these items, fewer respondents (between 0%-9%) indicated they disagreed with these assessments.

⁸ Due to rounding, the percentage for “received medical care at a military hospital/medical center or medical treatment facility” is 24% and not 25%.

- About two-thirds indicated, to a *large extent*, they were provided *information on health options* (62%). About half of respondents indicated, to a *large extent*, they were provided *adequate follow-up care* and *necessary items/care* (both 48%).
 - Between 19%-30% indicated they were provided these items to a *moderate extent*, 6%-14% were provided these items to a *small extent*, and 9%-19% indicated they were *not at all* provided these items.
- The majority (86%) indicated they received *all of the medical care they requested*.
- Overall, three-quarters (75%) indicated they were *satisfied* with the medical services received for the sexual assault, whereas 8% indicated they were *dissatisfied*.

Assessment of Mental Health Services for Sexual Assault

Of the 52% of respondents who received mental health care at a military mental health treatment facility:

- A large majority *agreed* the provider *maintained their confidentiality* (90%), *supported them* (85%), *treated them professionally* (84%), *asked questions appropriate for the reason for their visit* (82%), *listened to them without judgment* and *thoroughly answered their questions* (both 81%), and *seemed knowledgeable about dealing with sexual assault in the military* (77%).
 - Across these items, fewer respondents (between 3%-12%) indicated they *disagreed* with these assessments.
- More than half (61%) indicated, to a *large extent*, they were provided *information on mental health treatment options* and *adequate follow-up care*.
 - About a quarter (22%-28%) indicated they were provided the items to a *moderate extent*, 4%-9% to a *small extent*, and between 7%-8% indicated they were *not at all* provided these items.
- Overall, about three-quarters (79%) indicated that overall they were *satisfied* with the mental health services received for the sexual assault, whereas 8% indicated they were *dissatisfied*.

Experiences and Satisfaction With Special Victims' Counsel/Victims' Legal Counsel

The SES asks respondents a variety of questions about their experiences and satisfaction with SVC/VLC. These individuals act as legal counsel for the survivor and provide advocacy, support, and act as the intermediary between the prosecutors and the survivor. While these resources are most often utilized by unrestricted reporters with open investigations, the Department allows restricted reporters to confer with SVC/VLC to obtain legal information. Therefore, this section includes both unrestricted and restricted reporters. Results are presented

for survey respondents at the Total DoD level. Additional details about the experiences of the respondent and satisfaction with SVC/VLC are included in Chapter 5 of this report.

Assessment of SVC/VLC

Of the 68% of respondents who used a SVC/VLC:

- A large majority *agreed* the SVC/VLC *treated them professionally* (97%), *listened to them without judgment* (96%), *supported them* (96%), and *thoroughly answered their questions* (93%).
 - Across these items, fewer respondents indicated they *disagreed* (between 1%-2%).
- The majority (90%) indicated they were *satisfied* with the services provided by the SVC/VLC, whereas 3% indicated they were *dissatisfied*.

Response of Chain of Command

The *SES* asks respondents who interacted with members in their unit as a result of the assault about the response of their unit commander/director and other members in their chain of command (e.g., senior enlisted advisor, immediate supervisor). These survey items are applicable only to unrestricted reporters by policy and therefore we present percentages for unrestricted reporters only. Results are presented for survey respondents at the Total DoD level. Additional details on these findings are included in Chapter 6 of this report.

Assessment of the Unit Commander/Director Response to Report of Sexual Assault

Of the 64% of respondents who made an unrestricted report and spoke to their unit commander/director in response to the sexual assault:

- More than two-thirds *agreed* the unit commander/director *supported them* (82%), *took steps to address their privacy and confidentiality* (80%), *treated them professionally* (79%), *listened to them without judgment* (78%), and *thoroughly answered their questions* (70%).
 - Across these items, less than one-fifth (between 14%-18%) of respondents indicated they *disagreed*.
- About three-quarters (73%) indicated that overall they were *satisfied* with the unit commander/director's response to the sexual assault; whereas 16% indicated they were *dissatisfied*.

Assessment of Another Member in Chain of Command's Response to Report of Sexual Assault

Of the 81% of respondents who made an unrestricted report and spoke to another member in their chain of command in response to the sexual assault:

- More than two-thirds *agreed* the other member in their chain of command *treated them professionally and supported them* (both 71%), *listened to them without judgment* (70%), *took steps to address their privacy and confidentiality* (68%), and *thoroughly answered their questions* (62%).
 - Across these items, about one-fifth (20%-23%) indicated they *disagreed*.
- About two-thirds (61%) indicated that overall they were *satisfied* with the other member's response to the sexual assault, whereas 29% indicated they were *dissatisfied* with the other member's response to the sexual assault.

Experiences and Satisfaction With Chaplains

The SES asks respondents questions about their overall experiences and satisfaction with chaplains. Results are presented for survey respondents at the Total DoD level. Additional details on these findings are included in Chapter 7 of this report.

Assessment of Chaplains

Of the 31% of respondents who used chaplain services as a result of the sexual assault:

- The majority *agreed* the chaplain *treated them professionally* (98%), *listened to them without judgment* (95%), *maintained their confidentiality* (93%), *supported them* (90%), and *thoroughly answered their questions* (85%).
 - Across these items, fewer respondents (less than 10%) indicated they *disagreed*.
- The majority (86%) indicated that overall they were *satisfied* with the services provided by the chaplain, whereas 7% indicated they were *dissatisfied*.

Overall Experiences With the Reporting Process

The SES asks respondents about their overall experience with the SAPR program as a result of reporting a sexual assault. This includes details on whether the respondent believed they experienced retaliation after reporting, the overall importance of SAPR needs throughout the reporting process, and whether the respondent would recommend others report their sexual assault. Results are presented for survey respondents at the Total DoD level. Additional details on these findings are included in Chapter 8 of this report.

Extent of Assistance Provided by Resources/Services After Reporting

- More than half of respondents indicated, to a *large extent*, they were provided assistance with *information on the available reporting options* (76%), *information on the right to consult either a SVC or a VLC* (67%), *regular contact regarding their well-being* (65%), and *information to address confidentiality concerns* (56%).
 - Between 12%-21% indicated they were provided assistance across those items to a *moderate extent*, 4%-14% to a *small extent*, and 5%-9% indicated they were *not at all* provided assistance with these items.

Extent of Assistance Provided by Resources/Services After Reporting for Unrestricted Reporters

Of the 80% of respondents who made an unrestricted report,

- About three-quarters (74%) indicated, to a *large extent*, they were provided *information on the right to request an expedited transfer*. Almost two-thirds indicated, to a *large extent*, they were provided information *about Victim's Rights (VWAP – DD Form 2701; 65%)* and *safety planning information regarding the immediate situation* (62%). Nearly half of respondents (48%) indicated, to a *large extent*, they were provided accurate *up-to-date information on case status*.
 - Between 10%-21% of respondents indicated they were provided assistance across those items to a *moderate extent*, between 10%-18% to a *small extent*, and 6%-13% indicated they were *not at all* provided these items.

Overall Importance of Sexual Assault Resources During the Reporting Process

To better understand the ongoing needs of survivors, the SES asks respondents about the importance of a variety of issues during the reporting process.

- More than two-thirds of respondents indicated the following were *important* during the sexual assault reporting process: *maintaining a sense of privacy* (95%), *being able to have a say in issues related to the sexual assault* (92%), *safety* (90%), *support in managing duty responsibilities* and *mental health/counseling services* (both 84%), *some other need* (76%), and *medical services and treatment* (67%).
 - Across these items, fewer respondents (between 1%-11%) indicated these needs were *unimportant*.

Perceived Retaliation Since Reporting for Unrestricted Reporters

The Department continues to express concern over the perception of retaliation against survivors who make reports of sexual assault. To gauge this, respondents were asked about their perceived experiences with two types of retaliation: social retaliation (e.g. ignored by

coworkers, blamed for situation) and professional retaliation⁹ (e.g., loss of privileges, transferred to less favorable job).¹⁰

- Of the 80% of respondents who made an unrestricted report, 59% of respondents indicated they perceived *social retaliation* to some extent since they reported their sexual assault (27% to a *large extent*, 12% to a *moderate extent*, and 20% to a *small extent*) and 40% indicated they perceived *professional retaliation* to some extent since they reported their sexual assault (20% to a *large extent*, 10% to a *moderate extent*, and 9% to a *small extent*) since they reported their sexual assault.

Would Recommend Others Report Their Sexual Assault

One of the ways the Department measures progress is whether respondents who report a sexual assault would recommend others report as well.

- Nearly three quarters of all respondents (73%) indicated based on their overall experience of reporting, *yes*, they would recommend others report their sexual assault, whereas 14% of respondents indicated *no* and 13% were *unsure* if they would recommend others report their sexual assault.

⁹ This measure captures behaviors that some survivors perceive as professional retaliation. Additional information will be collected in 2015 to better understand the experiences of survivors who experienced social and/or professional retaliation.

¹⁰ Results from DMDC's 2012 *Workplace and Gender Relations Survey of Active Duty Members* indicated some respondents did not want to report their sexual assault because they were afraid of possible social and/or professional retaliation.

Table of Contents

	<u>Page</u>
Executive Summary	iii
Survey Methodology.....	iii
Background on Reporting Information.....	v
Awareness of Resources	v
Overall Interactions With Sexual Assault Resources	vi
Experiences and Satisfaction With Sexual Assault Response Coordinators or Unit Victims' Advocates/Victims' Advocates.....	vi
Experiences With the SARC.....	vi
Experiences With the UVA/VA.....	vii
Extent of Assistance Provided by the SARC or UVA/VA.....	vii
Extent of Assistance Provided by the SARC or the UVA/VA for Unrestricted Reporters.....	vii
Satisfaction With Services Provided by SARC and UVA/VAs.....	viii
Experiences and Satisfaction With Medical Care and Mental Health Services	viii
Assessment of Medical Services for Sexual Assault	viii
Assessment of Mental Health Services for Sexual Assault	ix
Experiences and Satisfaction With Special Victims' Counsel/Victims' Legal Counsel	ix
Assessment of SVC/VLC	x
Response of Chain of Command	x
Assessment of the Unit Commander/Director Response to Report of Sexual Assault.....	x
Assessment of Another Member in Chain of Command's Response to Report of Sexual Assault.....	xi
Experiences and Satisfaction With Chaplains	xi
Assessment of Chaplains	xi
Overall Experiences With the Reporting Process	xi
Extent of Assistance Provided by Resources/Services After Reporting.....	xii
Extent of Assistance Provided by Resources/Services After Reporting for Unrestricted Reporters	xii
Overall Importance of Sexual Assault Resources During the Reporting Process	xii
Perceived Retaliation Since Reporting for Unrestricted Reporters	xii
Would Recommend Others Report Their Sexual Assault	xiii
Chapter 1: Introduction	1
Overview of Report.....	2
Survey Content by Chapter.....	2
Survey Methodology.....	3
Presentation of Results.....	7
Summary	7
Chapter 2: Background on Reporting Information	9

Table of Contents (Continued)

	<u>Page</u>
Awareness of Resources	10
Initial Contact After the Assault	10
Reporting of Sexual Assault	13
Overall Interactions With Sexual Assault Resources	17
Chapter 3: Experiences and Satisfaction With Sexual Assault Response Coordinators or Unit Victims' Advocates/ Victims' Advocates.....	19
Experiences With the SARC.....	19
Experiences With the UVA/VA.....	20
Overall Experiences With SARCs and UVAs/VAs.....	23
Chapter 4: Experiences and Satisfaction With Medical Care and Mental Health Services.....	29
Medical Care.....	29
Mental Health Care	43
Chapter 5: Experiences and Satisfaction With Special Victims' Counsel/Victims' Legal Counsel	51
Chapter 6: Response of Chain of Command.....	53
Chapter 7: Experiences and Satisfaction With Chaplains.....	57
Chapter 8: Overall Experience With the Reporting Process.....	59
Chapter 9: Future Directions.....	65
References.....	67

Appendices

A. Dynamic Questionnaire.....	69
B. Questionnaire-Specific Service Text.....	87

List of Tables

1. Number of Respondents by Reporting Category	6
--	---

Table of Contents (Continued)

	<u>Page</u>
List of Figures	
1. Example Graphic: Interactions With a Unit Victims' Advocate or Victims' Advocate (UVA/VA)	7
2. Awareness of Sexual Assault Resources Prior to the Sexual Assault	10
3. Who Respondent First Told About the Sexual Assault	11
4. Initial Person Advised Survivor to Contact Sexual Assault Response Coordinator (SARC) or Uniformed Victims' Advocate/Victims' Advocate (UVA/VA).....	12
5. Type of Initial Report Made	13
6. Recipient of the Unrestricted Report	14
7. Recipient of the Initial Restricted Report	15
8. Restricted Report Converted to Unrestricted Report.....	16
9. Final Report Type	16
10. Respondents Interacted With the Following Providers Because of the Sexual Assault.....	17
11. Respondents Interacted With Leadership Because of the Sexual Assault for Unrestricted Reporters	18
12. Interactions With the Sexual Assault Response Coordinator (SARC)	19
13. Interactions With a Unit Victims' Advocate or Victims' Advocate (UVA/VA).....	20
14. Interactions With the Unit Victims' Advocate (UVA)	21
15. Interactions With the Victims' Advocate (VA)	22
16. Extent of Assistance Provided by the Sexual Assault Response Coordinator (SARC) or the Unit Victims' Advocate/Victims' Advocate (UVA/VA)	23
17. Extent of Assistance Provided by the Sexual Assault Response Coordinator (SARC) or the Unit Victims' Advocate/Victims' Advocate (UVA/VA) for Unrestricted Reporters	24
18. Overall Satisfaction With the Services Provided by the Sexual Assault Response Coordinator (SARC)	25
19. Likelihood of Recommending Another Survivor Meet With a Sexual Assault Response Coordinator (SARC)	25
20. Overall Satisfaction With the Services Provided by the Unit Victims' Advocate (UVA) 26	26
21. Overall Satisfaction With the Services Provided by the Victims' Advocate (VA)	26
22. Likelihood of Recommending Another Survivor Meet With Unit Victims' Advocate/Victims' Advocate (UVA/VA).....	27
23. Received Medical Care After Sexual Assault.....	29
24. Sexual Assault Response Coordinator (SARC) or Unit Victims' Advocate/Victims' Advocate (UVA/VA) Accompanied Survivor to Clinic/Hospital	30
25. Assessment of Medical Services for the Sexual Assault	31
26. Assessment of Medical Services for the Sexual Assault for Those Who Received Care at Military Facility.....	32
27. Extent of Assistance Provided by Medical Services for the Sexual Assault	33

Table of Contents (Continued)

	<u>Page</u>
28. Extent of Assistance Provided by Medical Services for the Sexual Assault for Those Who Received Care at Military Facility	34
29. Received Medical Care for Physical Injury After the Sexual Assault.....	35
30. Received Medical Care for Physical Injury After the Sexual Assault for Those Who Received Care at Military Facility	36
31. Received SAFE for Evidence Collection.....	37
32. Received SAFE for Evidence Collection for Those Who Received Care at Military Facility	38
33. Reasons for Not Receiving a SAFE for Evidence Collection.....	39
34. Reasons for Not Receiving a SAFE for Evidence Collection for Those Who Received Care at Military Facility	40
35. Received All the Medical Care Requested	41
36. Received All the Medical Care Requested for Those Who Received Care at Military Facility	41
37. Overall Satisfaction With Medical Services for the Sexual Assault.....	42
38. Overall Satisfaction With Medical Services for the Sexual Assault for Those Who Received Care at Military Facility	42
39. Received Mental Health Care After Sexual Assault.....	43
40. Assessment of Mental Health Care for the Sexual Assault	44
41. Assessment of Mental Health Care for the Sexual Assault for Those Who Received Care at Military Facility	45
42. Extent of Assistance Provided by Mental Health Services for the Sexual Assault	46
43. Extent of Assistance Provided by Mental Health Services for the Sexual Assault for Those Who Received Care at Military Facility	47
44. Overall Satisfaction With Mental Health Services for the Sexual Assault.....	48
45. Overall Satisfaction With Mental Health Services for the Sexual Assault for Those Who Received Care at Military Facility	49
46. Assessment of Special Victims' Counsel/Victims' Legal Counsel (SVC/VLC).....	51
47. Overall Satisfaction With Services Provided by the Special Victims' Counsel/Victims' Legal Counsel (SVC/VLC).....	52
48. Assessment of the Unit Commander/Director's Response to Report of Sexual Assault for Unrestricted Reporters.....	53
49. Overall Satisfaction With Response of Unit Commander/Director to Report of Sexual Assault for Unrestricted Reporters.....	54
50. Assessment of Another Member in Chain of Command's Response to Sexual Assault for Unrestricted Reporters.....	55
51. Overall Satisfaction With Response of Another Member in Chain of Command to Report of Sexual Assault for Unrestricted Reporters	56
52. Assessment of Chaplain Services Related to the Sexual Assault	57
53. Extent of Assistance Provided by Resources/Services After Reporting.....	59
54. Extent of Assistance Provided by Resources/Services After Reporting for Unrestricted Reporters	60

Table of Contents (Continued)

	<u>Page</u>
55. Overall Importance of Sexual Assault Resources During the Reporting Process	61
56. Overall Importance of Sexual Assault Resources During the Reporting Process for Unrestricted Reporters	62
57. Perceived Retaliation Since Reporting for Unrestricted Reporters	63
58. Would Recommend Others Report Their Sexual Assault	64

2014 SURVIVOR EXPERIENCE SURVEY PRELIMINARY RESULTS

Chapter 1: Introduction

The Department of Defense (DoD) has a strong commitment to providing Sexual Assault Prevention and Response (SAPR) resources and services to all military members who report a sexual assault. Over the years, the Department, under the guidance of the DoD Sexual Assault Prevention and Response Office (SAPRO), has worked to create new and improve programs in an effort to provide support to military sexual assault survivors. The *Survivor Experience Survey (SES)* is the first DoD-wide survey effort designed to assess the use and effectiveness of the sexual assault services and resources that military survivors of sexual assault receive. This report for the *2014 SES* is based on preliminary findings from Quarter 4 of fiscal year 2014 (FY2014). As the survey does not encompass the full fiscal year, these findings are preliminary in nature, but nonetheless provide information on an important population which is of great interest to the Department.

This overview report discusses preliminary findings from the *2014 SES*, which includes data collected from June 4, 2014 to September 22, 2014. This survey was conducted in response to a Secretary of Defense Directive requiring a standardized and voluntary survey for survivors be developed and regularly administered to “provide the sexual assault victim/survivor the opportunity to assess and provide feedback on their experiences with SAPR victim assistance, the military health system, the military justice process, and other areas of support” (Secretary of Defense, 2014). Defense Research, Surveys, and Statistics Center (RSSC)¹¹ within the Defense Manpower Data Center (DMDC; DMDC-RSSC) was tasked with this effort. For over 25 years, RSSC has been DoD’s lead organization for conducting impartial and unbiased scientific survey and focus group research on a number of topics of interest to the Department.

The *SES* is the first survey of sexual assault survivors conducted across all DoD components including active duty, Reserves, and National Guard. The *SES* was designed with input and support from SAPR representatives from the DoD, the Services, the National Guard, as well as the Office of General Counsel (OGC). All representatives had a shared goal of gathering accurate data on survivor experiences, while balancing respect for the survivor and the need for anonymity. The *SES* is not intended to be a scientific survey (e.g., employing statistical sampling and weighting). It is a strictly anonymous effort providing the survivors maximum protection against privacy concerns.¹²

The *SES* fielded at the latter end of FY2014 in order to capture preliminary findings from those eligible survivors who were receiving services anytime after October 2013. As this survey is ongoing, data will continue to be collected and reported out by fiscal year. This chapter provides an overview of the *2014 SES* survey content by chapter and survey methodology.

¹¹ Prior to 2014, RSSC was called Human Resources Strategic Assessment Program (HRSAP). In 2014, DMDC reorganized and renamed the RSSC to better encapsulate the scope of research conducted by this group.

¹² The Office of the Under Secretary of Defense (Personnel and Readiness) Research Regulatory Oversight Office reviewed the *SES* and determined that the study was not research involving human subjects according to Department of Defense Instruction 3216.02.

Overview of Report

Survey Content by Chapter

The goal of the SES is to hear directly from active duty, Reserve, and National Guard survivors about their experiences with SAPR services and resources. DMDC-RSSC worked closely with representatives from DoD SAPRO and SAPR representatives across all of the Services and National Guard to create a survey that would enable the DoD to gauge whether the current SAPR programs and resources are meeting the needs of military sexual assault survivors. Areas that were of specific interest to the Department were: awareness of SAPR resources and reporting options, use of and satisfaction with SAPR personnel (including Sexual Assault Response Coordinators [SARCs], Uniformed Victims' Advocates/Victims' Advocates [UVAs/ VAs], and legal personnel), use of and satisfaction with SAPR-related medical and mental health services, and leadership responses to sexual assault reports. With these interests in mind, the SES was developed to provide details related to the sexual assault survivor's overall reporting process and experience.¹³

Specific topics covered in this report are organized across seven chapters:¹⁴

- Chapter 2 summarizes the respondents' initial awareness and contact with SAPR resources. This includes awareness of sexual assault resources prior to his/her sexual assault, who the respondent first spoke to about his/her sexual assault, whether the respondent was advised to contact a SARC or UVA/VA, the type of report initially made, to whom the initial restricted or unrestricted report was made, whether the restricted report was converted, and who the respondent talked to/interacted with as a result of the sexual assault.
- Chapter 3 summarizes the respondents' experiences and levels of satisfaction with SARCs, UVAs, and/or VAs.
- Chapter 4 summarizes the respondents' experiences with medical care services, satisfaction with these services, experiences with mental health care services, and satisfaction with these services.
- Chapter 5 summarizes the respondents' experiences and levels of satisfaction with Special Victims' Counsel/Victims' Legal Counsel (SVC/VLC).

¹³ This survey and items included in it align with two of the “Lines of Effort (LoE)” in the DoD Sexual Assault Prevention and Response Office’s Strategic Plan (2013). LoE 4, “Advocacy/Victim Response,” addresses victim support, response, and reporting options. The goal of this LoE is to ensure there are trained people in place to respond and care for sexual assault survivors. LoE 5, “Assessment,” includes a standardized data collection effort that measures, analyzes, assesses, and can be used to report program progress. The goal of this LoE is to ensure the DoD’s sexual assault prevention and response programs are working effectively.

¹⁴ Survey items included in this report were from the core set of questions that all DoD respondents could have seen. There was an additional set of questions designed by each of the Services/National Guard that could have only been seen by respondents from that specific Service/National Guard. As this report only includes results at the Total DoD level, results from Service/National Guard questions are not included.

- Chapter 6 summarizes the response of the unit commander to the report of sexual assault as well as command's (e.g., senior enlisted advisor, immediate supervisor) overall response.
- Chapter 7 summarizes the respondents' experiences and levels of satisfaction with chaplain services as related to the sexual assault.
- Chapter 8 summarizes the respondents' overall experiences and levels of satisfaction with services/information provided from any sources, the importance of services/support during the reporting process, perceived experiences of professional and social retaliation as a result of reporting, and whether respondents would recommend that others report their sexual assault.

Survey Methodology

The goal of the *SES* is to learn about the overall reporting experiences from all current uniformed military members covered by DoDD 6495.01, who made a restricted/unrestricted report for any form of sexual assault, and made their report at least 30 days prior to completing the survey, but after 1 October 2013.¹⁵ Uniformed military members include members of the active duty (Army, Navy, Marine Corps, and Air Force), the Reserve (Army Reserve, Navy Reserve, Marine Corps Reserve, and Air Force Reserve), and the National Guard (Army National Guard and Air National Guard). Results are presented in this report at the Total DoD level. Survey items were constructed to be Service-specific so as to match the experience of the survivor. For example, for items that referenced “Unit Victims’ Advocate/Victims’ Advocate,” Army and Army Reserve respondents saw “SHARP Victims’ Advocate” and Navy and Navy Reserve respondents saw “Unit Sexual Assault Prevention and Response Victims’ Advocate (Unit SAPR VA) or Sexual Assault Prevention and Response Victims’ Advocate (SAPR VA).” Appendix B includes the specific language presented for each Service.

As this was the first DoD-wide survey to measure experiences of military sexual assault survivors, DMDC-RSSC worked closely with representatives from DoD SAPRO and SAPR across all Services/National Guard to determine the best way to conduct the survey, balancing the collection of data with maintaining respect for the sexual assault survivor’s privacy. With these issues in mind, it was determined that the *SES* would be an anonymous survey, providing sexual assault survivors maximum protection against privacy concerns, and would include no direct contact with the survivor from the survey team, nor an ability to “track” or determine the survivor’s identity. The challenge, given the limitations noted above, was how best to contact survivors to notify them of this survey effort while maintaining the privacy of the survivor. Contact with potential respondents was done primarily through SARCs, with additional support from UVAs/VAs and SVC/VLC. These providers are considered familiar or “safe” individuals for sexual assault survivors. Survey anonymity was achieved through a two-stage selection process.

¹⁵ The original timeframe was at least 30 days ago, but after 1 February 2014. On 17 July 2014, this timeframe was modified to at least 30 days ago, but the timeframe to make a report was extended to anytime after *October 2013*.

First, DMDC-RSSC was provided a list of SARCs for each Service (including active duty and Reserve) and National Guard. Using that list, DMDC-RSSC contacted all SARCs to notify them of the effort and to provide guidance on how SARC could offer the survey to eligible survivors.

Second, SARC contacted their clients, informed them of the survey, and assigned them a unique ticket number. For each survivor, ticket numbers were randomly generated by the Ticket Assignment Site; ticket numbers were not linked to any identifying information. Tickets were assigned to ensure only eligible respondents had access to the survey.

In addition to strict anonymity, many eligible survey participants were likely entering into, or in the midst of, open investigations. To this end, no open-ended responses were included in the survey to eliminate the possibility that a survivor might include identifying or incriminating information in an open-ended text box. While this strategy limited the ability of the Department to obtain qualitative information on survivor experiences, which is often very informative, the protection of the respondent was considered the priority.

The survey administration process for the *2014 SES* began on June 4, 2014, with the email of an announcement message to Service (including active duty and Reserve) and National Guard SARCs. This announcement email explained the SARC's role in the *2014 SES* data collection effort. As SARC have direct access to the majority of eligible survey participants, they were used as the primary means of contacting sexual assault survivors. Subsequent messages were sent to SARC which provided instructions on how and when to provide the survey participant communication, as well as how to generate ticket numbers for survivors. The survey participant communication, provided by the SARC, explained why the survey was being conducted, how anonymity would be protected, how the survey information would be used, and why participation was important. Throughout the administration period, additional email reminders were sent to SARCs reminding them of the survey effort, and encouraging them to reach out to survivors to ensure they were given the opportunity to take the survey. Additional messages were sent to UVAs/VAs and SVC/VLC to request their assistance in notifying eligible survivors, who may not have regular contact with their SARC, about the survey effort and provide steps to obtain a ticket number without requiring contact with a SARC.

The data detailed in this report are from both unrestricted and restricted reporters, offering the Department a preliminary look at how military sexual assault survivors are experiencing the SAPR process. Although the *SES* is available to all sexual assault survivors who met eligibility criteria, it is not designed to be a scientific study. The contact strategies used to select and reach out to sexual assault survivors limit DMDC-RSSC from employing its typical stratified random sampling and weighting procedures. Therefore, data presented from the *2014 SES* are not generalizable to all military sexual assault survivors and represent only the views of the survivors who took the survey.¹⁶

¹⁶ DMDC-RSSC understands there are some survivors who are not connected to military services and may not have received notification about the survey via SARC, UVA/VA, or SVC/VLC. As the survey continues, DMDC-RSSC is working with DoD to determine how best to reach these individuals while still protecting their privacy.

Results in this report are presented at the Total DoD level; however, Table 1 shows the number of respondents for the *2014 SES* broken out by individual reporting categories: Total DoD, Gender, Service, Age, and Report Type.

- *Gender* is broken out into two categories: *male* and *female*.
- *Service* is broken out into five categories: *Army*, *Navy*, *Marine Corps*, *Air Force* and *National Guard*. Reserve members are included in the Service totals (e.g., Army Reserve is included in the Army results). *National Guard* results include both Army National Guard and Air National Guard.
- *Age* is broken out into three groups, *18-24 Years Old*, *25-33 Years Old*, and *34 Years Old or Older*.¹⁷
- *Sexual Assault Report Type* includes two categories, *Restricted* and *Unrestricted*. The Department offers these two types of reporting options for military members. Restricted reporting allows survivors to access medical care, mental health care, and advocacy services, without initiating a criminal investigation or notifying command. An unrestricted report allows survivors to access the same care as those who file a restricted report, but the report is also referred for investigation to a Military Criminal Investigative Organization (MCIO) and the command is notified of the incident. Survivors may initially make a restricted report, but may later convert this report to an unrestricted report in order to initiate an investigation. Conversely, once a respondent makes an unrestricted report, he/she cannot convert this to a restricted report. For the *2014 SES*, the type of report is based on the *final* type of report made. Respondents whose report was converted from a restricted report to an unrestricted are included in *Unrestricted*.

¹⁷ The age categories offered to respondents on the instrument were *Under 18 years old*, *18-20 years old*, *21-24 years old*, *25-33 years old*, *34-45 years old*, *46-54 years old*, and *55 years old or older*. These categories were combined to maximize data reporting.

Table 1.*Number of Respondents by Reporting Category*

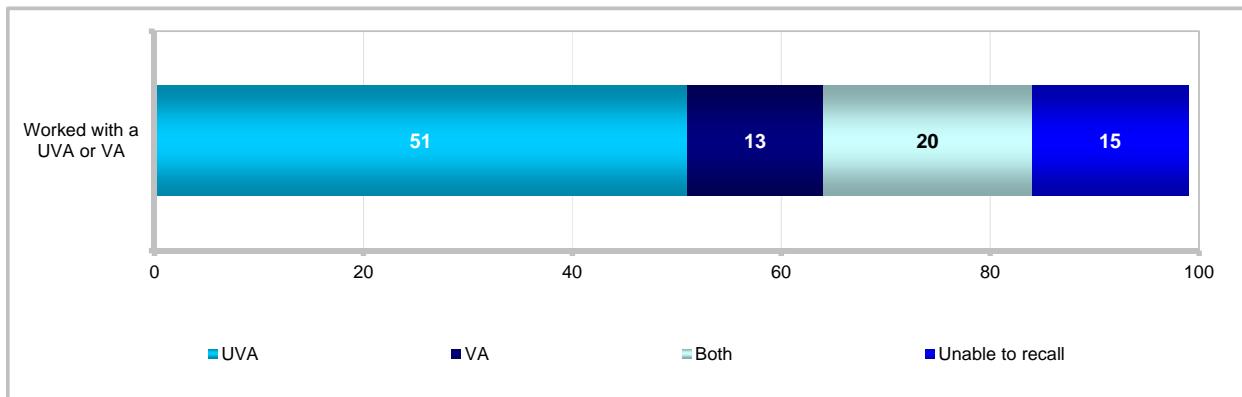
	Count	Percent
Total DoD	151	100%
Gender		
Men	19	13%
Women	131	87%
Service		
Army	43	28%
Navy	22	15%
Marine Corps	21	14%
Air Force	49	32%
National Guard	16	11%
Age		
18-24 Years Old	93	62%
25-33 Years Old	33	22%
34 Years Old or Older	24	16%
Sexual Assault Report Type		
Restricted	26	17%
Unrestricted	121	80%

Presentation of Results

Each finding in the *2014 SES* is presented in graphical form. Elongated bar charts in this report may not extend to the 100% end of the scale due to rounding. As seen in Figure 1, there is a small space between the bar chart and the end of the chart for estimates due to rounding.

Figure 1.

Example Graphic: Interactions With a Unit Victims' Advocate or Victims' Advocate (UVA/VA)



2014 SES Q15

Percent of applicable respondents who took the survey and interacted with a UVA or VA.

As the data from the *2014 SES* are unweighted, results may reflect a “true” 0% (i.e., no one endorsed the option). This will be reflected in text and chart form as “0.”

Summary

The following chapters provide preliminary results from the *2014 SES*. As mentioned, findings from this survey reflect data from the survivors who responded to the survey and cannot be generalized to all military survivors of sexual assault. Overall, from June 4, 2014 to September 22, 2014, the *2014 SES* had 782 new survey tickets generated.¹⁸ Of the 782 tickets generated, there were 151 completed surveys which inform the *2014 SES* report. The *SES* is an ongoing survey effort and results will continue to be reported out each fiscal year.

¹⁸ There were an additional 31 tickets that were regenerated. As these represent duplications, they do not count towards ticket totals.

Chapter 2: Background on Reporting Information

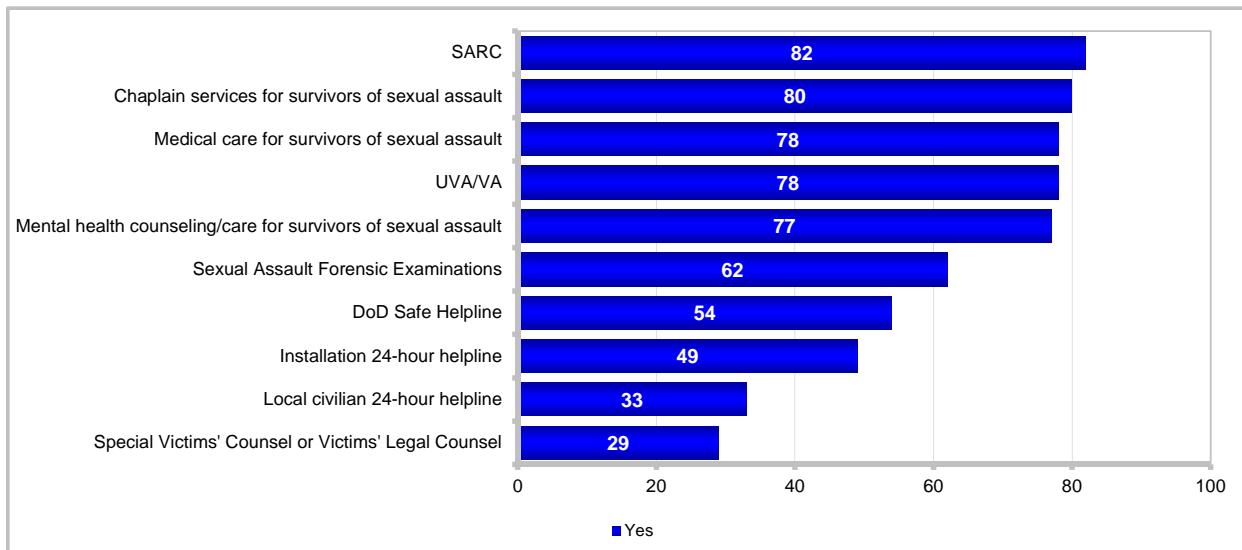
This chapter provides information on the respondent's awareness of Sexual Assault Prevention and Response (SAPR) resources prior to his/her sexual assault as well as details on who the respondent first told about the sexual assault, whether the respondent was advised to contact a Sexual Assault Response Coordinator (SARC) or a Unit Victims' Advocate/Victims' Advocate (UVA/VA), the type of report initially made, to whom the initial restricted or unrestricted report was made, whether the restricted report was converted, and whether the respondent talked to/interacted with SAPR providers because of the sexual assault. Results are presented for survey respondents at the Total DoD level.

Awareness of Resources

Overall, the majority of respondents were aware of the resources the DoD Sexual Assault Prevention and Response Office (SAPRO) offers sexual assault survivors (Figure 2).¹⁹

Specifically, more than three-quarters of respondents indicated that prior to the assault, they were aware of SARCs (82%), *chaplain services to survivors of sexual assault* (80%), *medical care to survivors of sexual assault* and *UVAs/VAs* (both 78%), and *mental health counseling/care for survivors of sexual assault* (77%). Sixty-two percent of respondents were aware of *Sexual Assault Forensic Examinations*. About half were aware of the *DoD Safe Helpline* (54%) and their *installation 24-hour helpline* (49%), while one-third were aware of the *local civilian 24-hour helpline* (33%). Less than one-third (29%) were aware of the *Special Victims' Counsel or Victims' Legal Counsel*.²⁰

Figure 2.
Awareness of Sexual Assault Resources Prior to the Sexual Assault



2014 SES Q6

Percent of all respondents who took the survey. Excludes those who indicated the resource did not exist at time of assault. Eligible number of respondents across these items ranges from 132 to 148.

Initial Contact After the Assault

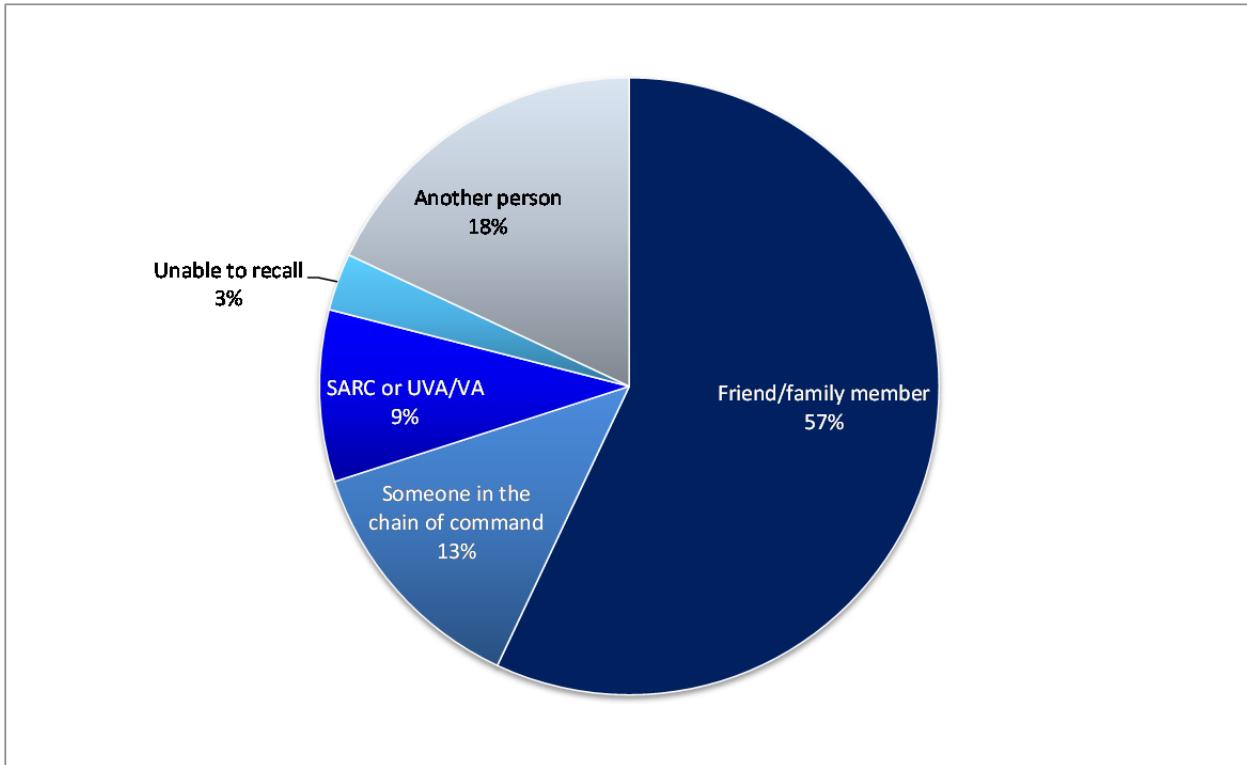
Over half of respondents (57%) first told a *friend/family member* of the sexual assault (Figure 3). Fewer respondents first told *another person* (18%; includes a chaplain, DoD Safe Helpline, medical and mental health providers, military and civilian law enforcement, Special

¹⁹ Some sexual assault resources for survivors have been established recently by the DoD and in some instances it may not have been available to a survivor prior to the sexual assault.

²⁰ This resource provides legal counsel for a military survivor of sexual assault and was established across DoD in 2013.

Victims' Counsel or Victims' Legal Counsel, and other military or civilian individuals or organizations not listed), *someone in their chain of command* (13%; includes the unit commander/director and other members of the chain of command) or a *SARC or UVA/VA* (9%). Three percent of respondents were *unable to recall* who they first told of the sexual assault.

Figure 3.
Who Respondent First Told About the Sexual Assault



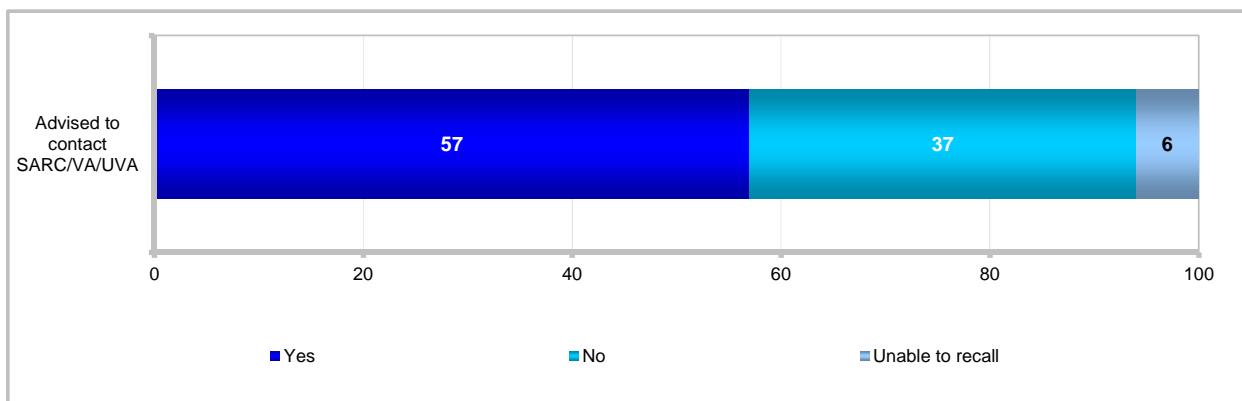
2014 SES Q7

Percent of all respondents who took the survey. Eligible number of respondents is 150.

Respondents who did not first tell a SARC or UVA/VA about their sexual assault were asked if the person they first spoke to advised them to contact a SARC or a UVA/VA. More than half of respondents (57%) indicated *yes*, the initial person advised them to contact a SARC or a UVA/VA, whereas 37% indicated *no*, the initial person did not (Figure 4). Six percent were *unable to recall* whether they were advised.

Figure 4.

Initial Person Advised Survivor to Contact Sexual Assault Response Coordinator (SARC) or Ununiformed Victims' Advocate/Victims' Advocate (UVA/VA)



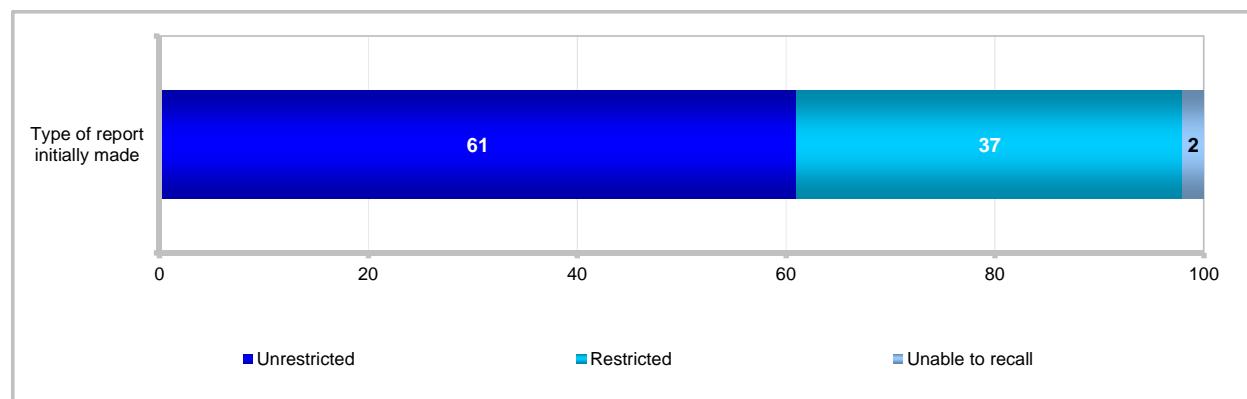
2014 SES Q8

Percent of respondents who took the survey and did not first contact a SARC or UVA/VA. Eligible number of respondents is 131.

Reporting of Sexual Assault

As mentioned, the Department offers military survivors two types of reporting options: restricted and unrestricted. Restricted reporting allows survivors to access medical care, mental health care, and advocacy services, without initiating a criminal investigation or notifying command. An unrestricted report allows survivors to access the same care as those who file a restricted report, but the report is also referred for investigation to an MCIO (Military Criminal Investigative Organization) and the command is notified of the incident. Survivors may initially make a restricted report, but may later convert this report to an unrestricted report in order to initiate an investigation. Conversely, once a respondent makes an unrestricted report, he/she cannot convert this to a restricted report. The majority of respondents who took the *2014 SES* (61%) indicated they initially made an *unrestricted* report, whereas 37% indicated they initially made a *restricted* report (Figure 5). Two percent were *unable to recall* what type of initial report they made.

Figure 5.
Type of Initial Report Made

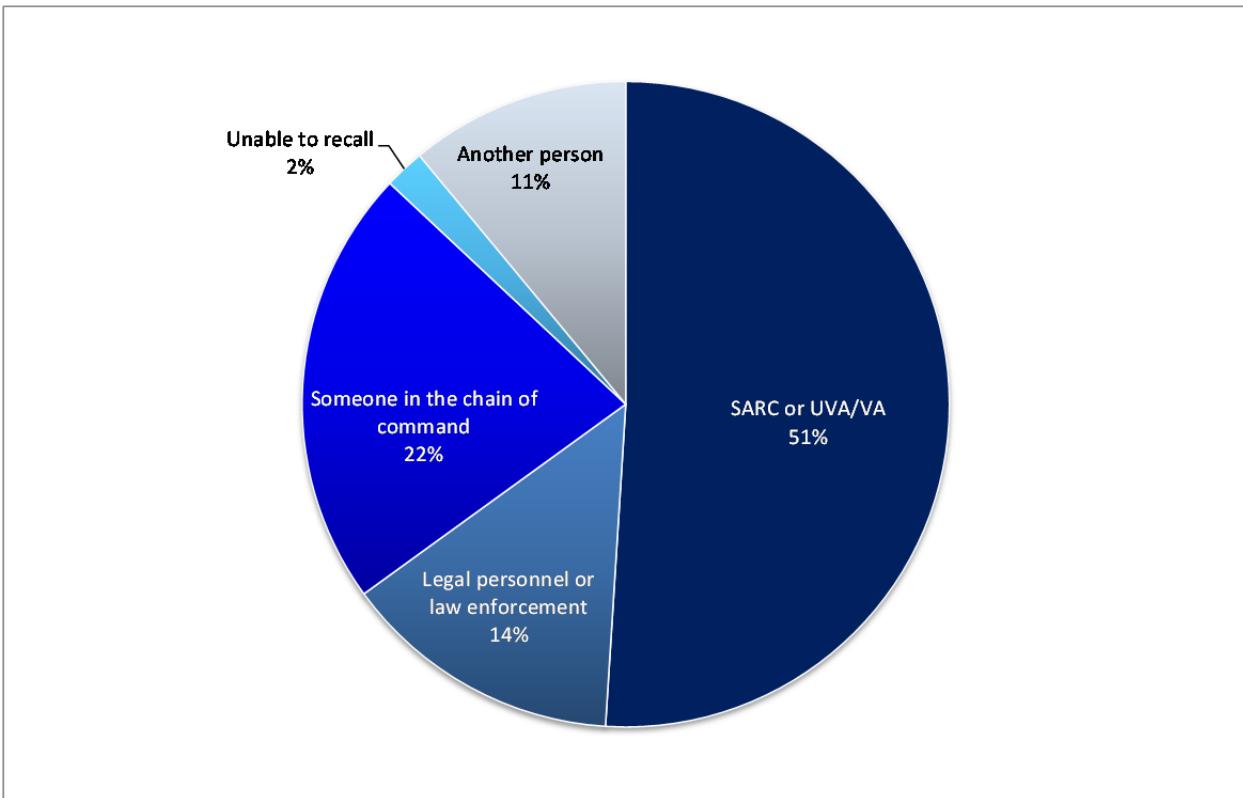


2014 SES Q9

Percent of all respondents who took the survey. Eligible number of respondents is 150.

Of the 61% of respondents who made an unrestricted report, over half (51%) indicated they made the unrestricted report to a *SARC or UVA/VA* (Figure 6). Twenty-two percent indicated they made the unrestricted report to *someone in their chain of command*, 14% indicated *legal personnel or law enforcement*, 11% to *another person* (includes, medical or mental health provider, chaplain, military or civilian individuals/organizations not listed and other), and 2% indicated they were *unable to recall* to whom they made their unrestricted report.

Figure 6.
Recipient of the Unrestricted Report

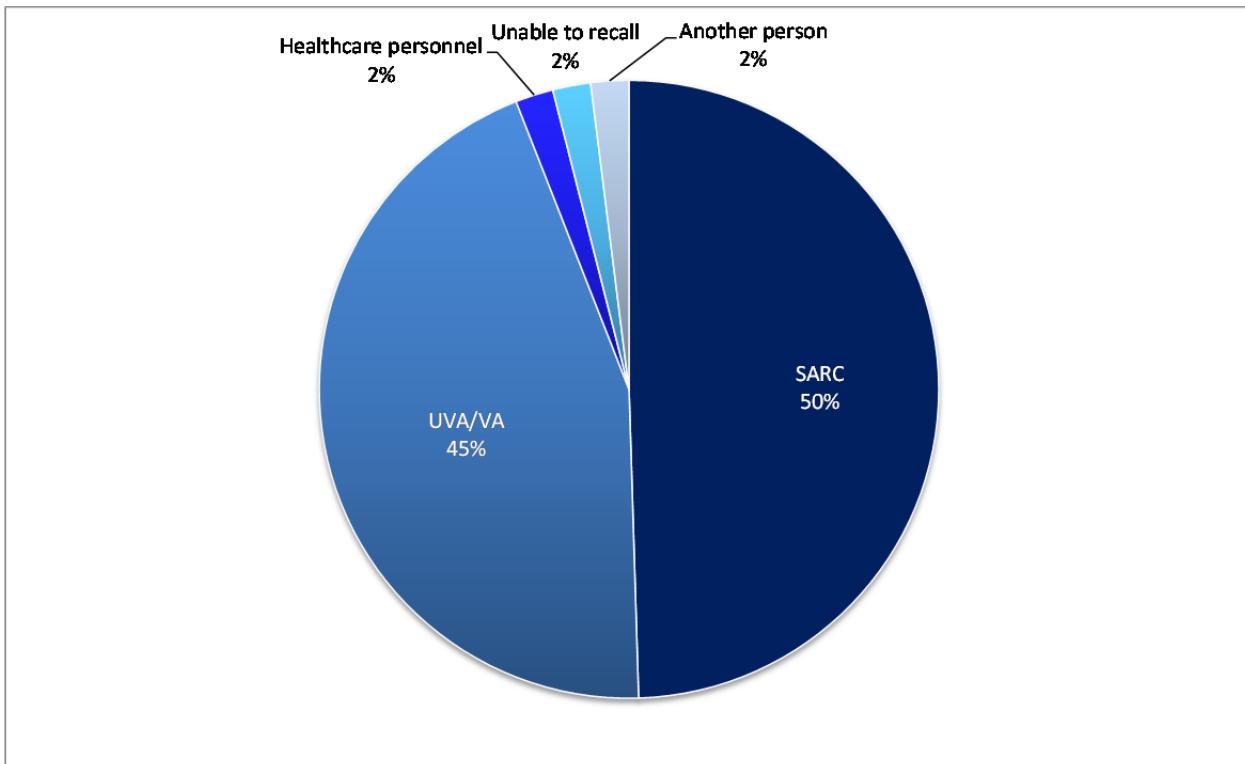


2014 SES Q10

Percent of respondents who took the survey and made an unrestricted report as the first report option. Eligible number of respondents is 91.

Within the DoD, a survivor of sexual assault has a limited number of individuals who can take a restricted report, primarily a SARC or VA/UVA. Reports made to other individuals, including someone in their chain of command or law enforcement, would automatically result in an unrestricted report. Given this, it is not surprising that of the 37% of respondents who made an initial restricted report,²¹ the vast majority (95%) made this report to a *SARC* (50%) or *UVA/VA* (45%; Figure 7). Fewer respondents indicated they told *healthcare personnel*, *another person*, or they were *unable to recall* to whom they made the initial restricted report (all 2%).

Figure 7.
Recipient of the Initial Restricted Report



2014 SES Q11

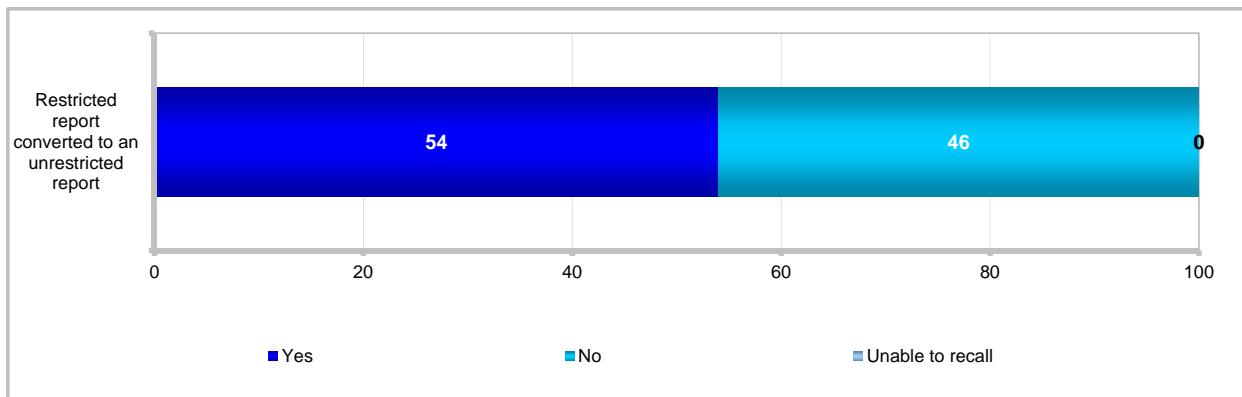
Percent of respondents who took the survey and made a restricted report. Sum of estimates may be over 100% due to rounding. Eligible number of respondents is 56.

As mentioned, a military survivor who initially makes a restricted report may decide to convert the report to unrestricted. Alternatively, a survivor may have their report involuntarily converted if the command or law enforcement is made aware of the incident. The survey asked respondents to indicate whether their restricted report was converted to an unrestricted report for any reason. Of the 37% of respondents who made an initial restricted report, over half (54%)

²¹ Military survivors of sexual assault have an option to convert a restricted report to an unrestricted report. Figure 7 presents data from respondents who initially made a restricted report, regardless of whether it was converted to unrestricted at a later date.

indicated yes, their restricted report was converted to an unrestricted report (50% chose to convert the report, 4% had their report converted without their participation; Figure 8). Forty-six percent indicated no, their restricted report was not converted.

Figure 8.
Restricted Report Converted to Unrestricted Report

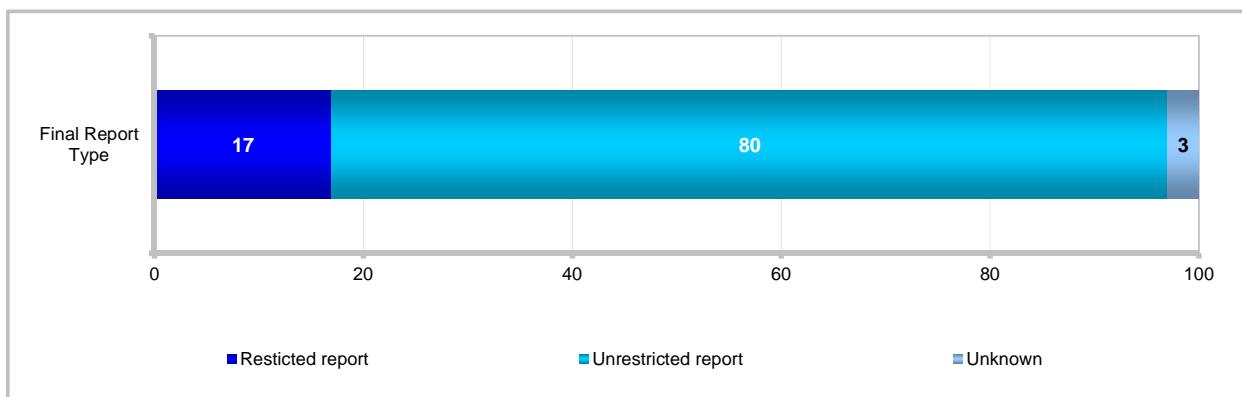


2014 SES Q12

Percent of respondents who took the survey and made a restricted report. Eligible number of respondents is 56.

The majority of respondents (80%) indicated their final report, including those restricted reports converted to unrestricted, was an *unrestricted report*, 17% indicated *restricted report*, and 3% indicated it was *unknown* (Figure 9).

Figure 9.
Final Report Type



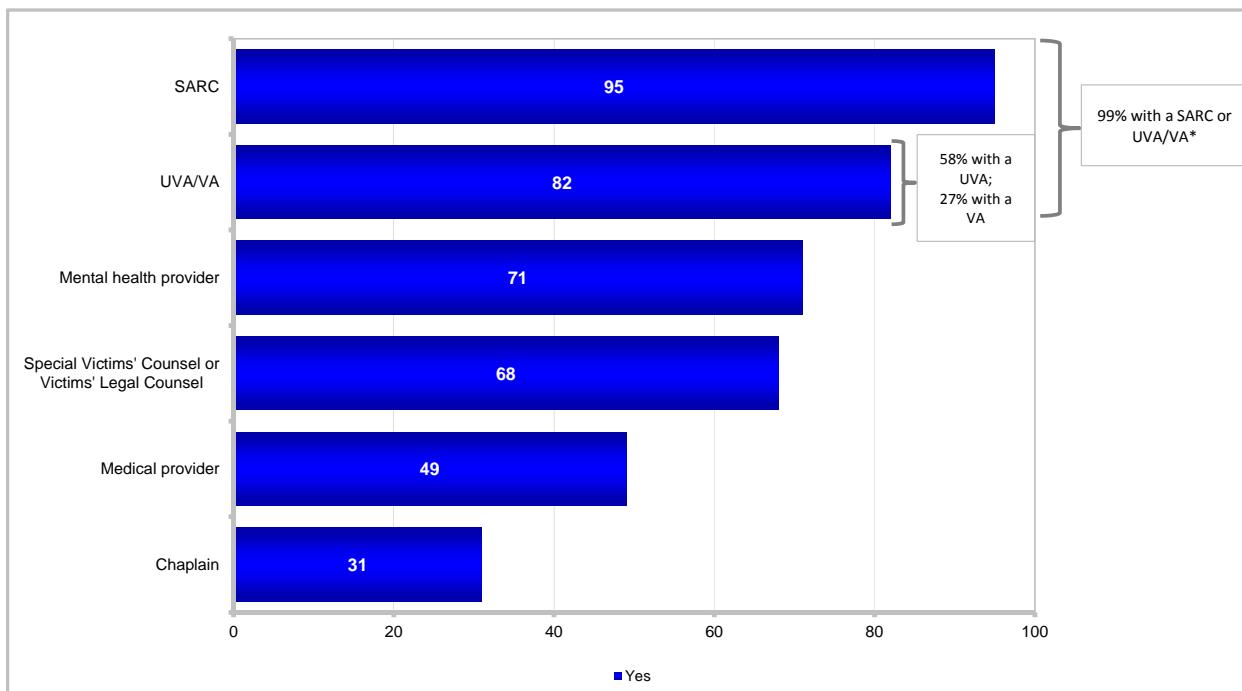
2014 SES Q9 and Q12

Percent of all respondents who took the survey. Eligible number of respondents is 151.

Overall Interactions With Sexual Assault Resources

Although the majority of respondents made a report to a SARC or UVA/VA, throughout the process they often interact with a variety of resources and providers available to them. Overall, the vast majority of respondents (99%) indicated they interacted with a *SARC* and/or a *UVA/VA* (*SARC*, 95% and *UVA/VA*, 82%) as a result of the sexual assault (Figure 10). This is not surprising considering the notification strategy of the survey relied heavily on the assistance of SARCs, UVAs, and VAs. In addition, more than two-thirds of respondents indicated, as a result of the assault, they spoke to a *mental health provider* (71%) and/or *Special Victims' Counsel/Victims' Legal Counsel* (68%). Forty-nine percent of respondents indicated they interacted with a *medical provider* and 31% indicated they interacted with a *chaplain* as a result of the assault.

Figure 10.
Respondents Interacted With the Following Providers Because of the Sexual Assault



2014 SES Q13 and Q15

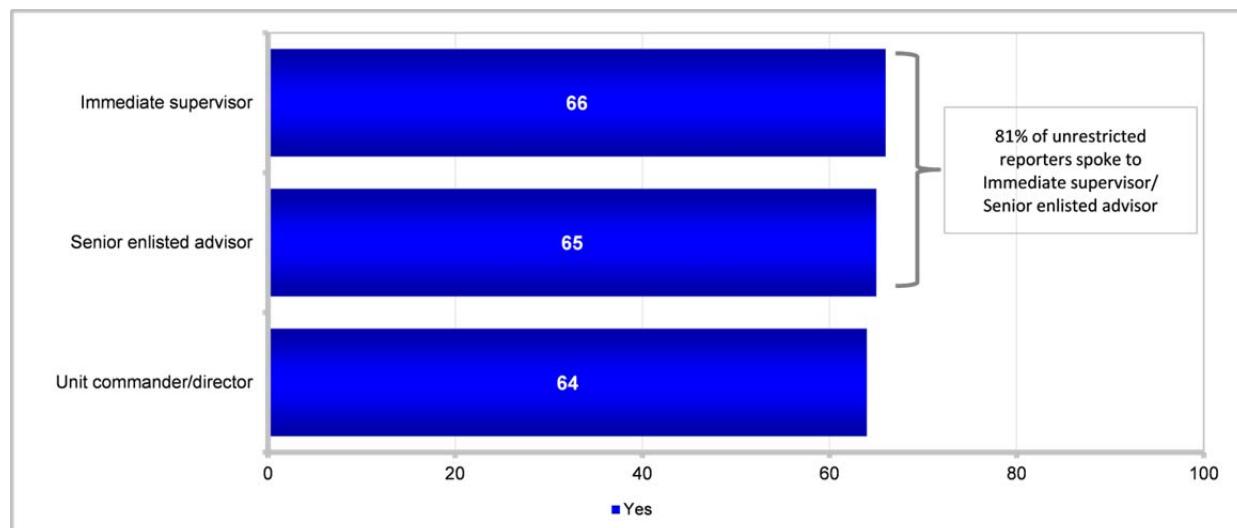
Percent of all respondents who took the survey. Respondents who indicated they interacted with providers on previous items (Q7, Q10 or Q11) are coded as "Yes" for this Figure. Eligible number of respondents across these items ranges from 143 to 149. Members who indicated "Yes" to these items saw follow-up questions on each provider (e.g., members who indicated yes to SARC saw follow-up questions on their use of and satisfaction with the SARC). Additionally, the percentages of "Yes" shown in this Figure represent the denominators for the majority of follow-up items included in Chapters 3-5 and 7.

* 99% of unrestricted reporters also spoke to a SARC or UVA/VA.

Unrestricted reporters often have additional interactions with leadership as a result of command's notification of the report. Figure 11 presents the percentages of unrestricted reporters who interacted with various individuals within their chain of command as a result of the assault.

Of the 80% of respondents who made an unrestricted report, about two-thirds indicated, as a result of the assault, they spoke to their *immediate supervisor* (66%), their *senior enlisted advisor* (65%), or their *unit commander/director* (64%).

Figure 11.
Respondents Interacted With Leadership Because of the Sexual Assault for Unrestricted Reporters



2014 SES Q13 and Q15.

Percent of respondents who took the survey and made an unrestricted report. Respondents who indicated they interacted with providers on previous items (Q7, Q10 or Q11) are coded as "Yes" for this Figure. Eligible number of respondents across these items ranges from 116 to 117. Members who indicated "Yes" to these items saw follow-up questions on these levels of leadership (e.g., members who indicated "Yes" to Unit commander/director saw follow-up questions on their interactions with the Unit commander/director). Additionally, the percentages of "Yes" shown in this Figure represent the denominators for the follow-up items included in Chapter 6.

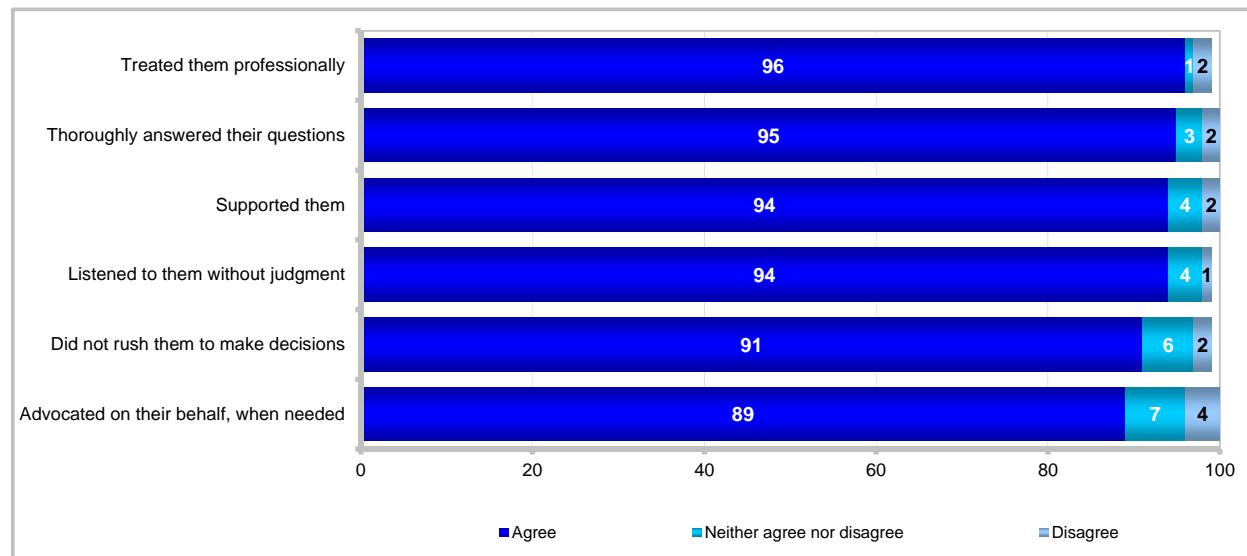
Chapter 3: Experiences and Satisfaction With Sexual Assault Response Coordinators or Unit Victims' Advocates/ Victims' Advocates

Respondents who indicated they spoke to/interacted with a Sexual Assault Response Coordinator (SARC) or a Unit Victims' Advocate/Victims' Advocate (UVA/VA) as a result of the sexual assault were asked about their satisfaction with these resources. Survey items included whether these Sexual Assault Prevention and Response (SAPR) personnel provided respondents with support, advocated on their behalf, and treated them professionally. Additional items included the respondent's overall satisfaction with these SAPR personnel and whether he/she would recommend other sexual assault survivors use them. Results are presented for survey respondents at the Total DoD level.

Experiences With the SARC

Of the 95% of respondents who interacted with a SARC, the majority *agreed* their SARC *treated them professionally* (96%), *thoroughly answered their questions* (95%), *supported them* and *listened to them without judgment* (both 94%), *did not rush them to make decisions* (91%), and *advocated on their behalf when needed* (89%; Figure 12). Across these items, fewer respondents (between 1%-4%) indicated they *disagreed*.

Figure 12.
Interactions With the Sexual Assault Response Coordinator (SARC)



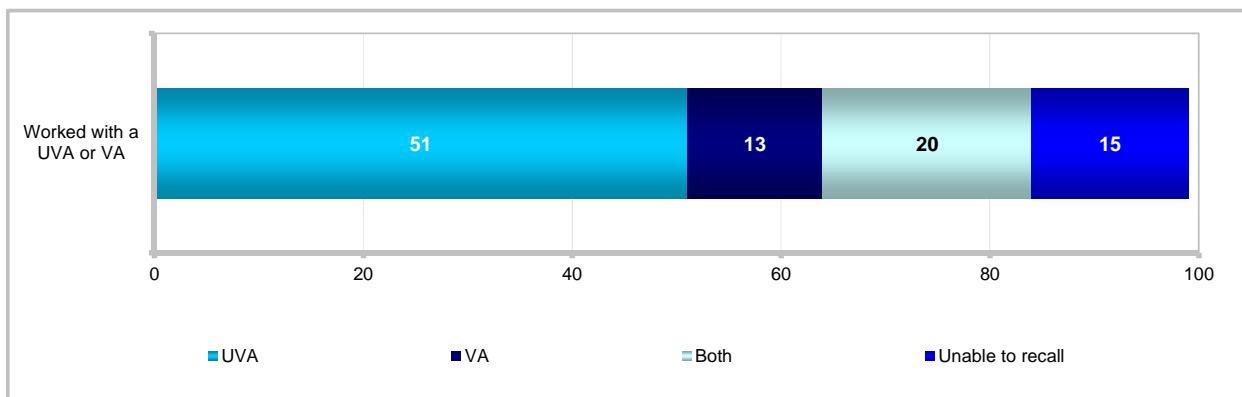
2014 SES Q14

Percent of applicable respondents who took the survey and interacted with a SARC. Eligible number of respondents across these items ranges from 137 to 140.

Experiences With the UVA/VA

The Department offers survivors of sexual assault assistance and services from both SARCs and UVAs/VAs. A UVA is a Uniformed Victims' Advocate (typically military member) and a VA is an installation-level Victims' Advocate (typically a DoD civilian). A survivor may interact with a UVA, a VA, or potentially both.²² Of the 82% of respondents who interacted with a UVA or a VA, more than half of respondents (51%) indicated they interacted only with a UVA, 13% indicated they interacted only with a VA, 20% indicated they interacted with *both* a UVA and VA, and 15% indicated they were *unable to recall* whether they interacted with a UVA or VA (Figure 13).

Figure 13.
Interactions With a Unit Victims' Advocate or Victims' Advocate (UVA/VA)



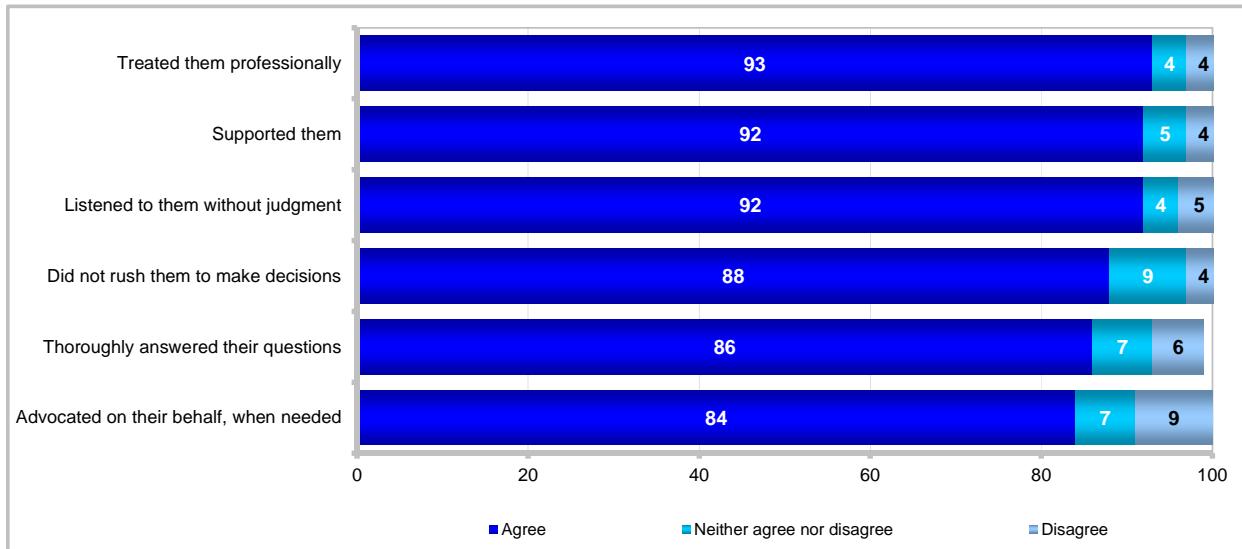
2014 SES Q15

Percent of applicable respondents who took the survey and interacted with a UVA or VA. Eligible number of respondents is 119.

²² A survivor may interact with both a UVA and a VA in certain circumstances, including if the survivor makes an initial report to the UVA and the UVA refers him/her to the Installation VA.

Of the 58% of respondents who interacted with a UVA, a large majority *agreed* their UVA *treated them professionally* (93%), *supported them* and *listened to them without judgment* (both 92%), *did not rush to make decisions* (88%), *thoroughly answered their questions* (86%), and *advocated on their behalf when needed* (84%; Figure 14). Across these items, fewer respondents (between 4%-9%) indicated they *disagreed*.

Figure 14.
Interactions With the Unit Victims' Advocate (UVA)

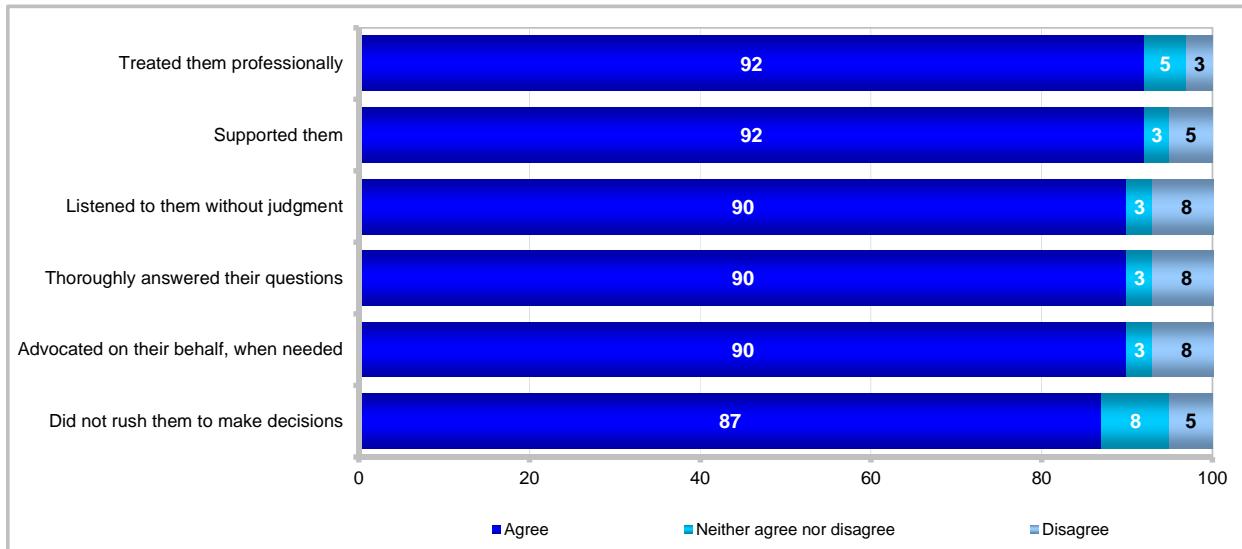


2014 SES Q16

Percent of applicable respondents who took the survey and interacted with a UVA. Eligible number of respondents across these items ranges from 81 to 83.

Of the 27% of respondents who interacted with a VA, a large majority *agreed* their VA *treated them professionally* and *supported them* (both 92%), *listened to them without judgment*, *thoroughly answered their questions*, and *advocated on their behalf when needed* (all 90%), and *did not rush them to make decisions* (87%; Figure 15). Across these items, fewer respondents (between 3%-8%) indicated they *disagreed*.

Figure 15.
Interactions With the Victims' Advocate (VA)



2014 SES Q17

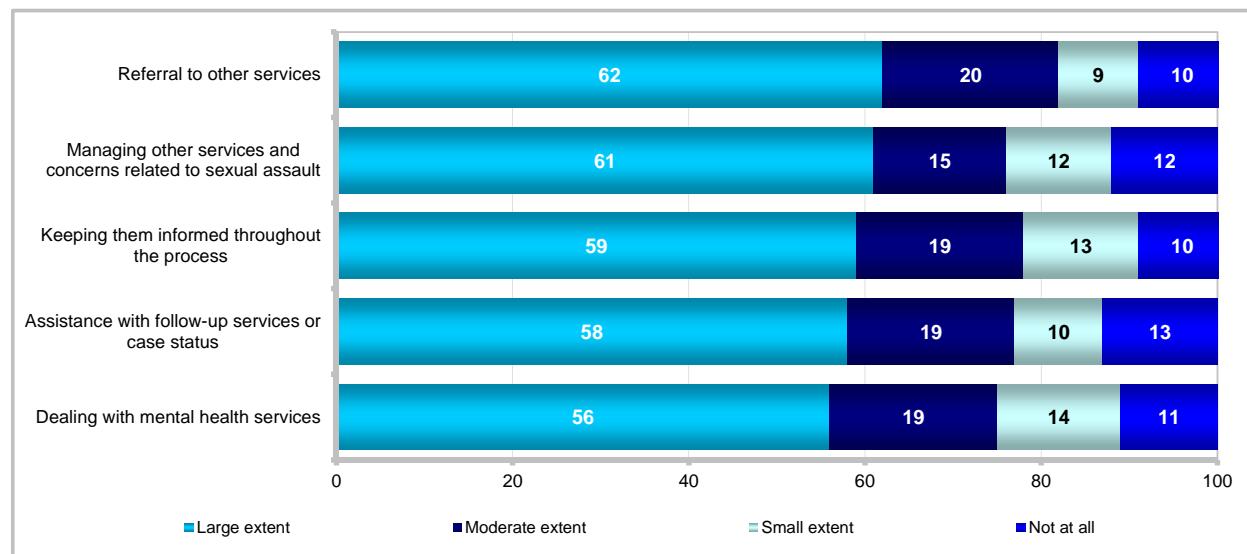
Percent of applicable respondents who took the survey and interacted with a VA. Eligible number of respondents across these items ranges from 38 to 39.

Overall Experiences With SARCs and UVAs/VAs

Of the 99% of respondents who used a SARC or a UVA/VA, more than half indicated, to a *large extent*, that the SARC or UVA/VA assisted them with *referral to other services* (62%), *managing other services and concerns related to sexual assault* (61%), *keeping them informed throughout the process* (59%), *follow-up services or case status* (58%), and *dealing with mental health services* (56%; Figure 16). Between 15%-20% indicated they were assisted to a *moderate extent*, between 9%-14% indicated they were assisted to a *small extent*, and between 10%-13% indicated they were *not at all* assisted with these aspects.

Figure 16.

Extent of Assistance Provided by the Sexual Assault Response Coordinator (SARC) or the Unit Victims' Advocate/Victims' Advocate (UVA/VA)



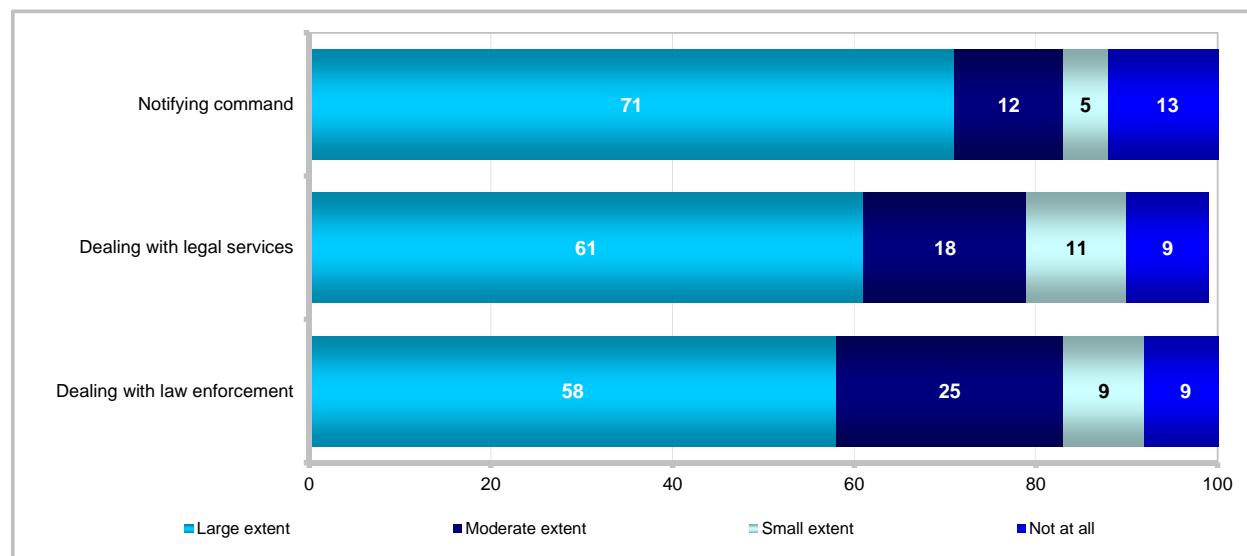
2014 SES Q19d, e, f, g and h

Percent of applicable respondents who took the survey and interacted with a SARC or UVA/VA. Eligible number of respondents across these items ranges from 115 to 134.

Some survey items may be relevant for all respondents, but applicable only to unrestricted reporters by policy. To best capture the impact of policy, Figure 17 presents percentages for unrestricted reporters only.

Of the respondents who made an unrestricted report, 99% used a SARC or a UVA/VA. Of these respondents, more than half indicated, to a *large extent*, that the SARC or UVA/VA assisted them with *notifying command* (71%), *dealing with legal services* (61%), and *dealing with law enforcement* (58%). Between 12%-25% indicated they were assisted to a *moderate extent*, between 5%-11% indicated they were assisted to a *small extent*, and between 9%-13% indicated they were *not at all* assisted.

Figure 17.
Extent of Assistance Provided by the Sexual Assault Response Coordinator (SARC) or the Unit Victims' Advocate/Victims' Advocate (UVA/VA) for Unrestricted Reporters



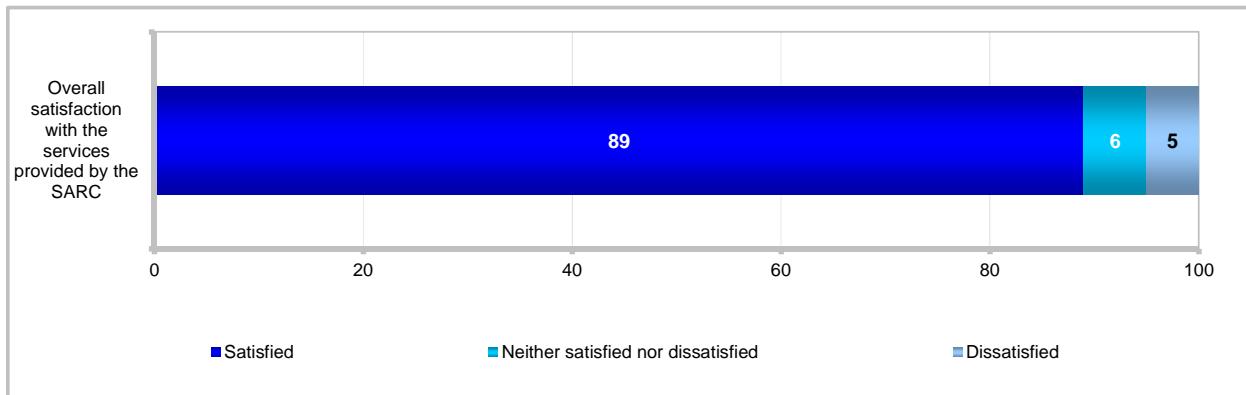
2014 SES Q19a, b and, c
Percent of applicable respondents who took the survey and interacted with a SARC or UVA/VA and made an unrestricted report. Eligible number of respondents across these items ranges from 93 to 98.

Overall, the vast majority of survivors (between 84%-89%) were *satisfied* with the services they received from their SARC, UVA, and VA and would likely recommend other survivors meet with these individuals after experiencing a sexual assault.

Specifically, of the 95% of respondents who interacted with a SARC, the majority (89%) indicated that overall they were *satisfied* with the services provided by the SARC, whereas 5% indicated they were *dissatisfied* (Figure 18).

Figure 18.

Overall Satisfaction With the Services Provided by the Sexual Assault Response Coordinator (SARC)



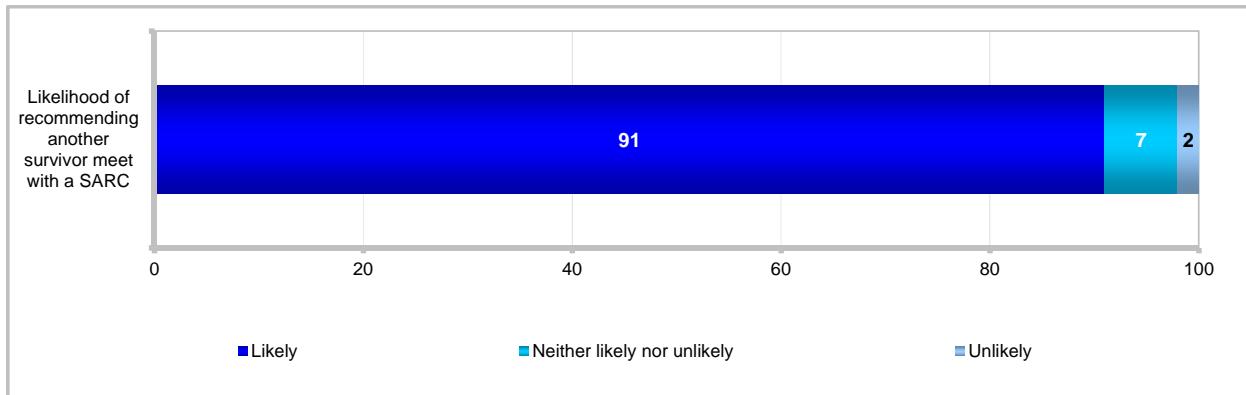
2014 SES Q20

Percent of respondents who took the survey and interacted with a SARC. Eligible number of respondents is 136.

Of the 95% of respondents who interacted with a SARC, a large majority (91%) indicated they would *likely* recommend another survivor meet with one, whereas 2% indicated they were *unlikely* (Figure 19).

Figure 19.

Likelihood of Recommending Another Survivor Meet With a Sexual Assault Response Coordinator (SARC)



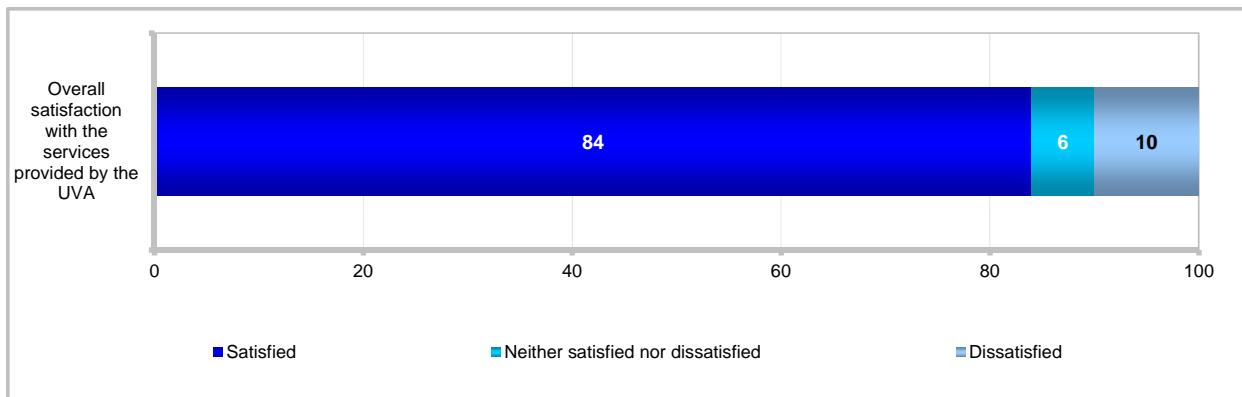
2014 SES Q21

Percent of respondents who took the survey and interacted with a SARC. Eligible number of respondents is 138.

Of the 58% of respondents who interacted with a UVA, the majority (84%) indicated that overall they were *satisfied* with the services provided by the UVA, whereas 10% indicated they were *dissatisfied* (Figure 20).

Figure 20.

Overall Satisfaction With the Services Provided by the Unit Victims' Advocate (UVA)



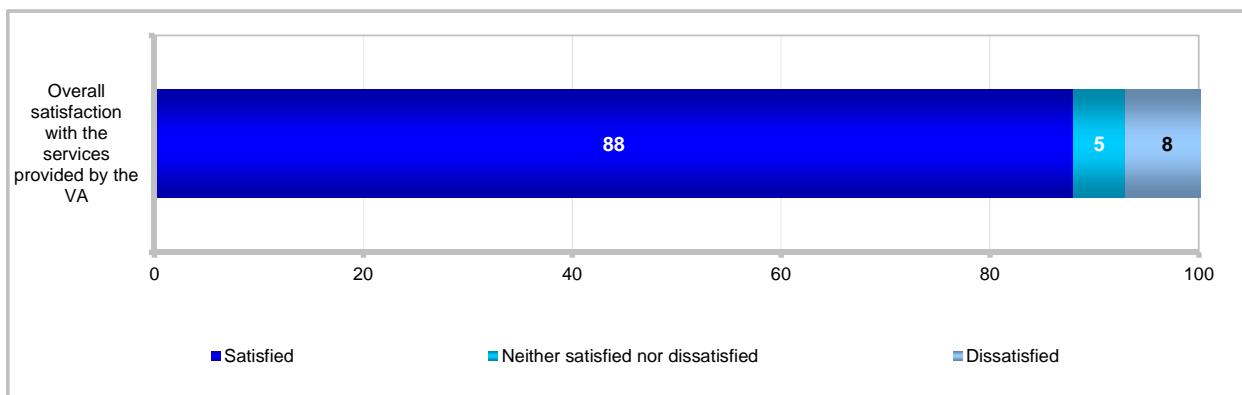
2014 SES Q22

Percent of respondents who took the survey and interacted with an UVA. Eligible number of respondents is 83.

Of the 27% of respondents who interacted with a VA, the majority (88%) indicated that overall they were *satisfied* with the services provided by the VA, whereas 8% indicated they were *dissatisfied* (Figure 21).

Figure 21.

Overall Satisfaction With the Services Provided by the Victims' Advocate (VA)



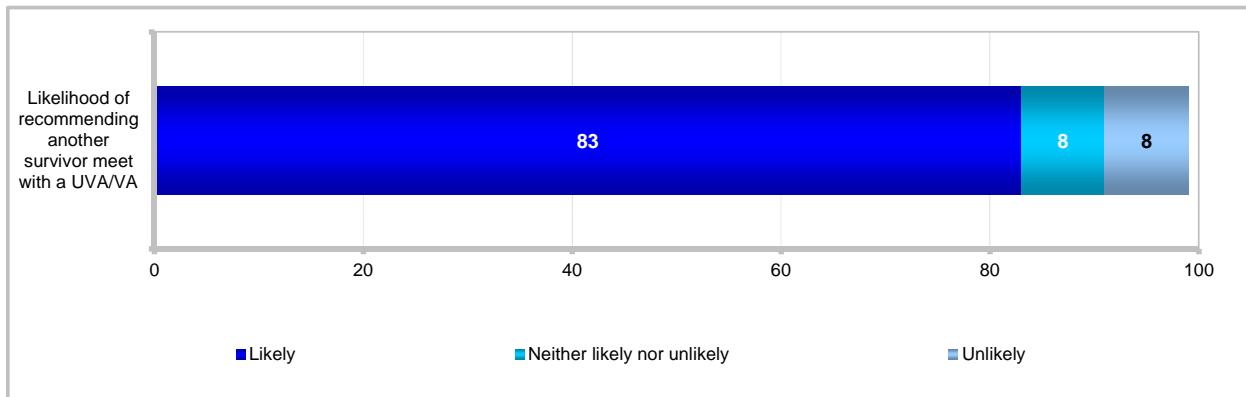
2014 SES Q23

Percent of respondents who took the survey and interacted with a VA. Eligible number of respondents is 40.

Of the 82% of respondents who interacted with a UVA or a VA, the majority (83%) indicated they would *likely* recommend another survivor meet with one of these resources, whereas 8% indicated they were *unlikely* (Figure 22).

Figure 22.

Likelihood of Recommending Another Survivor Meet With Unit Victims' Advocate/Victims' Advocate (UVA/VA)



2014 SES Q24

Percent of respondents who took the survey and interacted with an UVA/VA. Eligible number of respondents is 118.

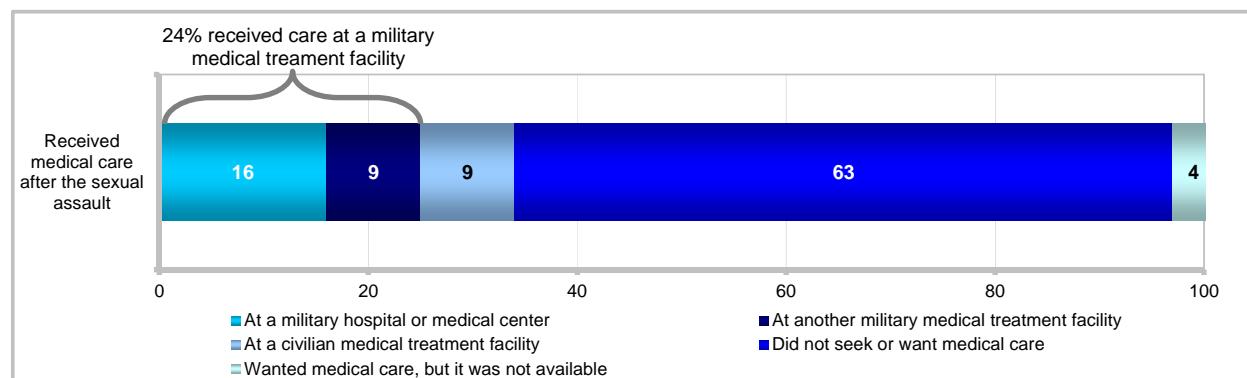
Chapter 4: Experiences and Satisfaction With Medical Care and Mental Health Services

Research has consistently shown that sexual assault has implications for both physical and psychological health (Turchik & Wilson, 2010). As a result, the Department offers survivors of sexual assault both medical and mental health services immediately following an assault and as needed after the assault. Respondents of the SES are first asked on the survey whether they used medical or mental health services as a result of the sexual assault. For those who have, the survey asks about their satisfaction with medical and mental health care providers and services. Survey items include whether the medical and mental health care personnel provided the respondent support, advocated on his/her behalf, and treated him/her professionally. Additional items include the respondent's overall satisfaction with the medical and mental health care providers and whether he/she would recommend other sexual assault survivors use these resources. Results are presented for survey respondents at the Total DoD level.

Medical Care

Nearly two-thirds of respondents (63%)²³ indicated they *did not seek or want medical care* (Figure 23). Thirty-three percent indicated they received medical care after the sexual assault from a military or civilian treatment provider (16% indicated *at a military hospital or medical center*, 9% *at another military medical treatment facility*, and 9% *at a civilian medical treatment facility*).²⁴ Four percent of respondents indicated they *wanted medical care, but it was not available*. Overall, 24% received medical care at a military medical treatment facility.²⁵

Figure 23.
Received Medical Care After Sexual Assault



2014 SES Q25

Percent of all respondents who took the survey. Eligible number of respondents is 147.

²³ Although 49% of respondents indicated in Figure 10 that they had interacted with a medical provider, this does not necessarily mean they received medical care after the sexual assault. With that in mind, all respondents were asked on the survey whether they received medical care after the sexual assault.

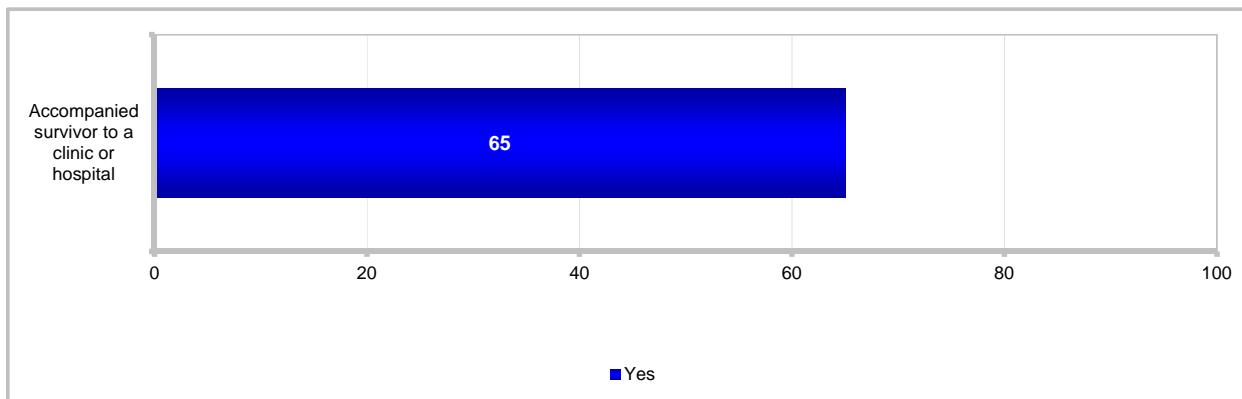
²⁴ Due to rounding, the percentage for “received medical care” is 33% and not 34%.

²⁵ Due to rounding, the percentage for “received medical care at a military hospital/medical center or medical treatment facility” is 24% and not 25% as would be the summation of *at a military hospital or medical center* (16%) and *at another military medical treatment facility* (9%).

As survivors of sexual assault often require or need medical care, the Department provides SARC/UVA/VA assistance during initial medical treatment if desired. Of the 33% of respondents who received medical care after the sexual assault (at a military or civilian treatment facility) and who interacted with a SARC and/or a UVA/VA,²⁶ about two-thirds (65%) indicated yes, the SARC or UVA/VA accompanied them to a clinic/hospital (Figure 24).

Figure 24.

Sexual Assault Response Coordinator (SARC) or Unit Victims' Advocate/Victims' Advocate (UVA/VA) Accompanied Survivor to Clinic/Hospital



2014 SES Q18

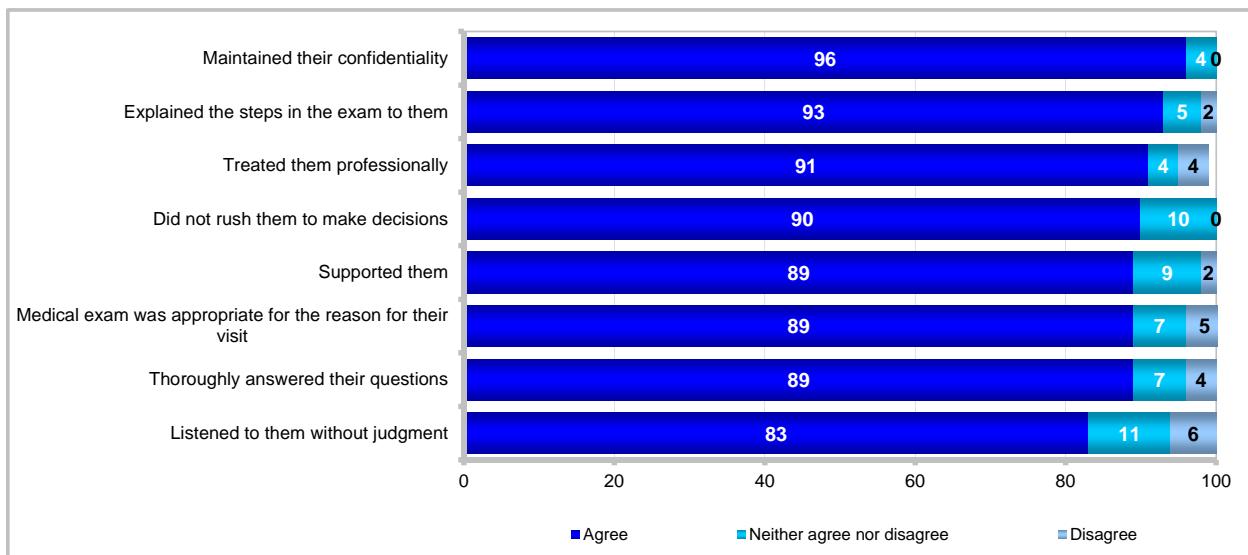
Percent of respondents who took the survey and interacted with a SARC or UVA/VA and received medical care (military or civilian location) after the sexual assault. Excludes those respondents who stated this item was not applicable (e.g., they did not want to be accompanied or did not want medical attention). Eligible number of respondents is 40.

For the remaining items in this section, results will be provided for all survey respondents regardless of where they received care (military or civilian treatment facility) and then specifically for those respondents who received care at a military medical facility.

²⁶ As shown in Figure 10, 99% of respondents interacted with a SARC or a UVA/VA. Of this 99% of respondents, 33% received medical care (at a military or civilian treatment facility).

Of the 33% of respondents who received medical care (at a military or civilian treatment facility), the majority *agreed* the provider *maintained their confidentiality* (96%), *explained the steps in the exam to them* (93%), *treated them professionally* (91%), *did not rush them to make decisions* (90%), *supported them*, performed *medical exams appropriate for the reason for their visit*, and *thoroughly answered their questions* (all 89%), and *listened to them without judgment* (83%; Figure 25). Across these items, fewer respondents (between 0%-6%) indicated they *disagreed* with these assessments.

Figure 25.
Assessment of Medical Services for the Sexual Assault

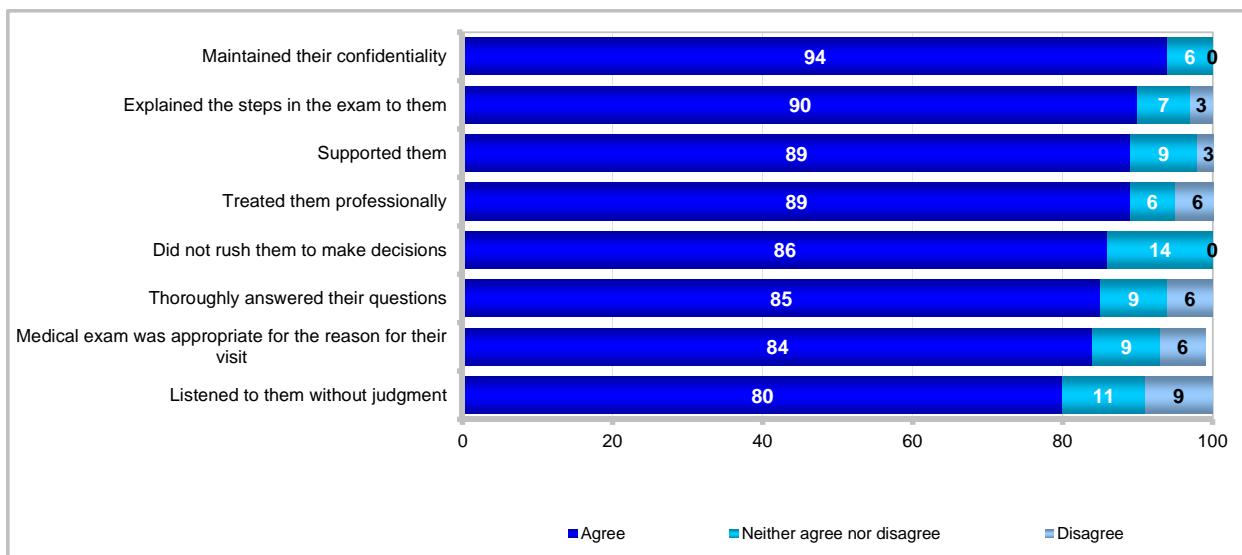


2014 SES Q26

Percent of applicable respondents who took the survey and received medical care. Eligible number of respondents across these items ranges from 39 to 47.

Of the 24% of respondents who received medical care at a military medical treatment facility, the majority *agreed* the provider *maintained their confidentiality* (94%), *explained the steps in the exam to them* (90%), *supported them and treated them professionally* (both 89%), *did not rush them to make decisions* (86%), *thoroughly answered their questions* (85%), performed *medical exams appropriate for the reason for their visit* (84%), and *listened to them without judgment* (80%; Figure 26). Across these items, fewer respondents (between 0%-9%) indicated they *disagreed* with these assessments.

Figure 26.
Assessment of Medical Services for the Sexual Assault for Those Who Received Care at Military Facility

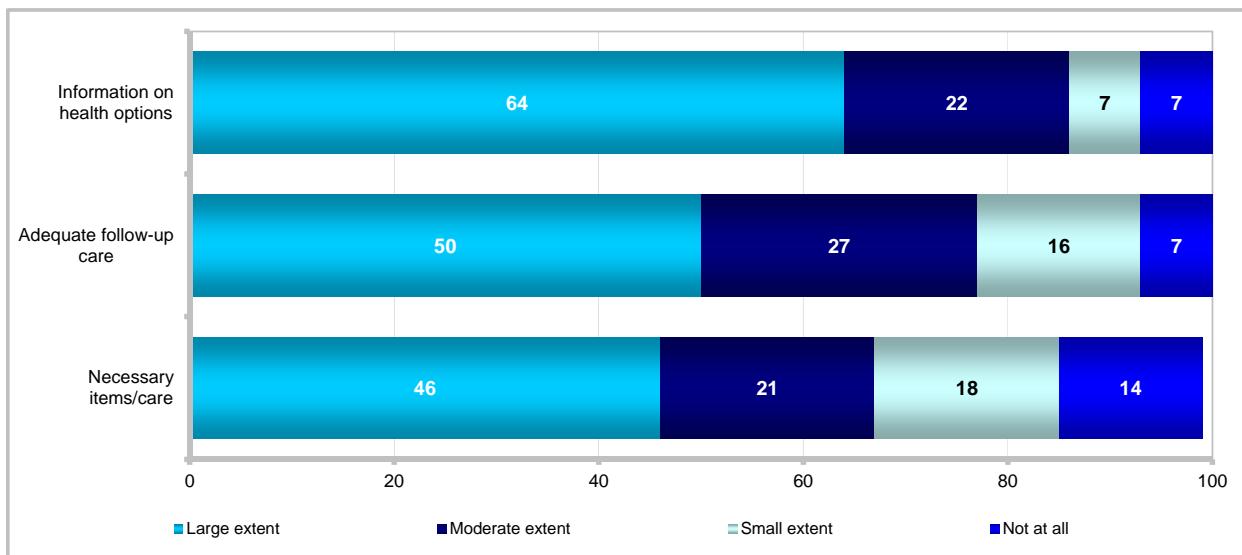


2014 SES Q26

Percent of applicable respondents who took the survey and received medical care at a military facility. Eligible number of respondents across these items ranges from 28 to 35.

Of the 33% of respondents who received medical care (at a military or civilian treatment facility), about two-thirds indicated, to a *large extent*, they were provided *information on health options* (64%; Figure 27). About half of respondents indicated, to a *large extent*, they were provided *adequate follow-up care* (50%) and *necessary items/care* (46%). About a quarter (21%-27%) indicated they were provided these items to a *moderate extent*, 7%-18% were provided these items to a *small extent*, and 7%-14% indicated they were *not at all* provided these items.

Figure 27.
Extent of Assistance Provided by Medical Services for the Sexual Assault

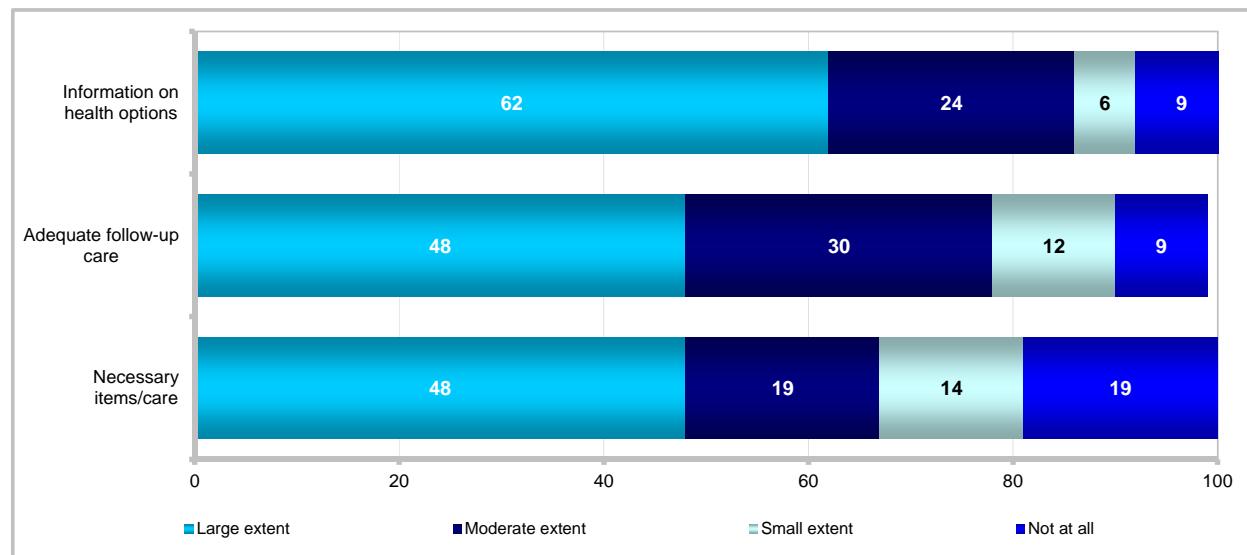


2014 SES Q27

Percent of applicable respondents who took the survey and received medical care. Eligible number of respondents across these items ranges from 28 to 45.

Of the 24% of respondents who received medical care at a military medical treatment facility, about two-thirds indicated, to a *large extent*, they were provided *information on health options* (62%; Figure 28). About half of respondents indicated, to a *large extent*, they were provided *adequate follow-up care* and *necessary items/care* (both 48%). Between 19%-30% indicated they were provided these items to a *moderate extent*, 6%-14% were provided these items to a *small extent*, and 9%-19% indicated they were *not at all* provided these items.

Figure 28.
Extent of Assistance Provided by Medical Services for the Sexual Assault for Those Who Received Care at Military Facility

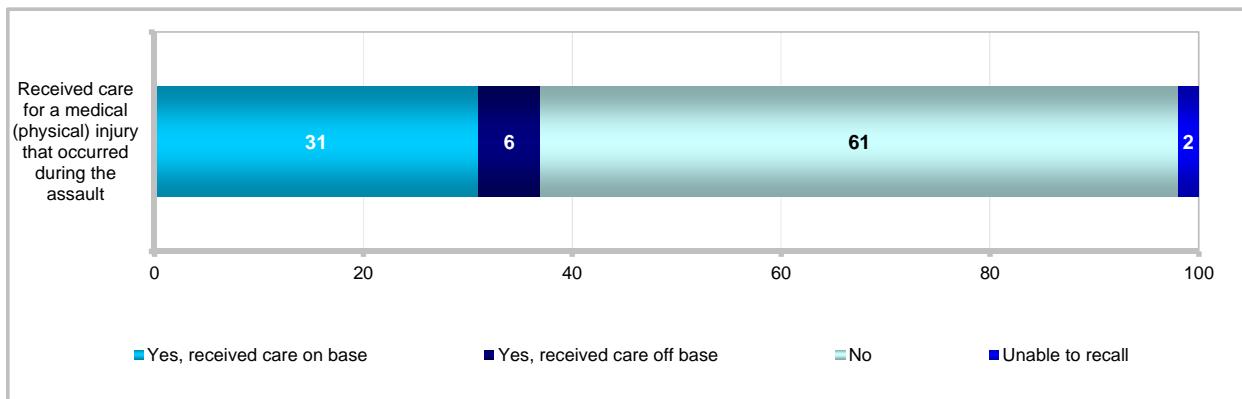


2014 SES Q27

Percent of applicable respondents who took the survey and received medical care at a military facility. Eligible number of respondents across these items ranges from 21 to 34.

Of the 33% of respondents who received medical care (at a military or civilian treatment facility), 61% indicated *no*, they did not receive care for a physical injury that occurred during the assault (Figure 29). Thirty-seven percent indicated *yes*, they received medical care for a physical injury that occurred during the assault (31% *received the care on base* and 6% *received care off base*). Two percent indicated they were *unable to recall* if they received care for a physical injury.

Figure 29.
Received Medical Care for Physical Injury After the Sexual Assault

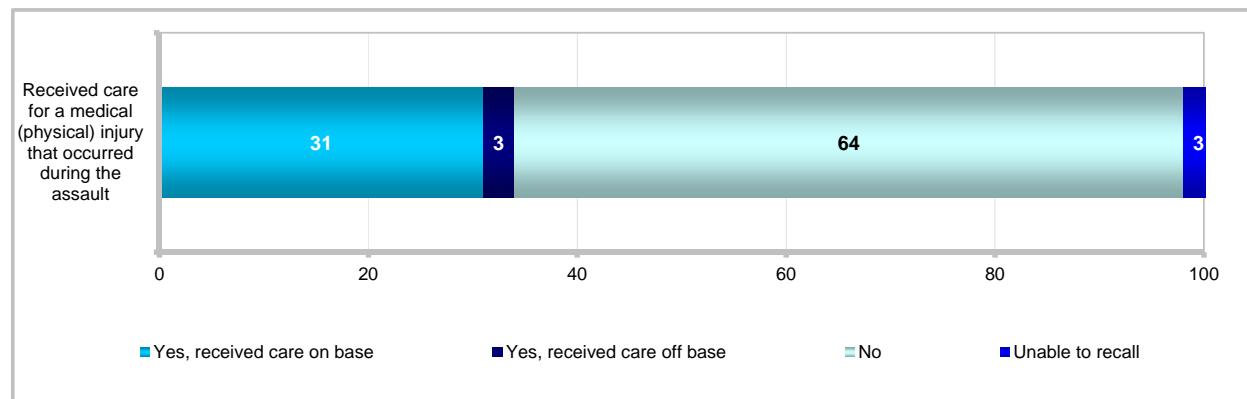


2014 SES Q28

Percent of respondents who took the survey and received medical care. Eligible number of respondents is 49.

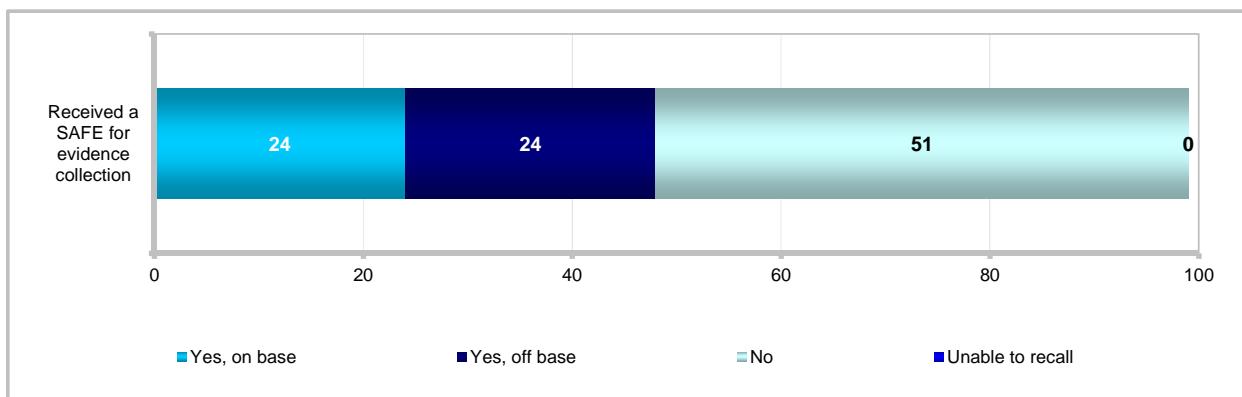
Of the 24% of respondents who received medical care at a military medical treatment facility, 64% indicated *no*, they did not receive care for a physical injury that occurred during the assault (Figure 30). Thirty-four percent indicated *yes*, they received medical care for a physical injury that occurred during the assault (31% *received care on base* and 3% *received care off base*). Three percent indicated they were *unable to recall* if they received care for a physical injury.

Figure 30.
Received Medical Care for Physical Injury After the Sexual Assault for Those Who Received Care at Military Facility



Survivors of sexual assault are often offered a Sexual Assault Forensic Examination (SAFE) in order to collect evidence for a potential investigation. Of the 33% of respondents who received medical care (at a military or civilian treatment facility), about half (49%)²⁷ indicated they received a SAFE for evidence collection (24% indicated they *received care on base* and 24% indicated they *received care off base*; Figure 31). Fifty-one percent of respondents indicated *no*, they did not receive a SAFE for evidence collection.

Figure 31.
Received SAFE for Evidence Collection



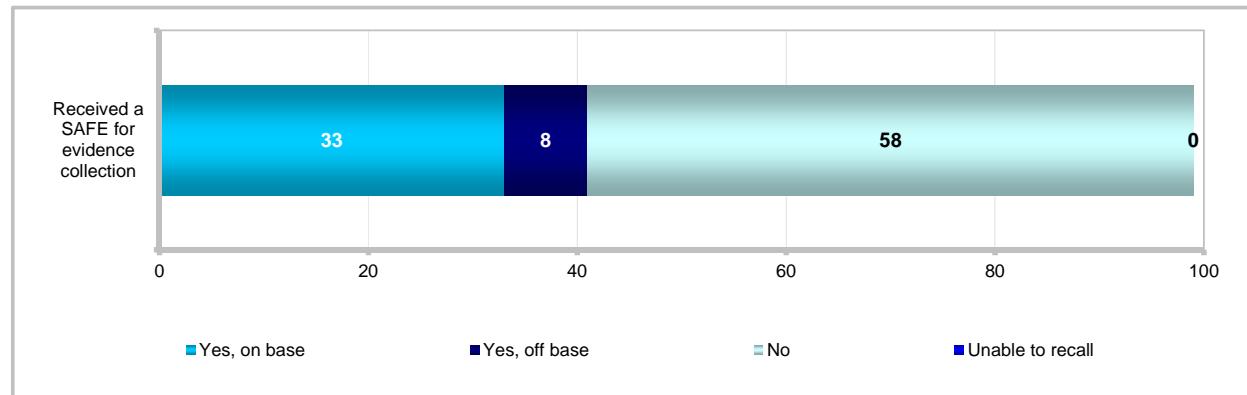
2014 SES Q29

Percent of respondents who took the survey and received medical care. Eligible number of respondents is 49.

²⁷ Due to rounding, the percentage for “received a SAFE for evidence collection” is 49% and not 48% as is the summation of yes, *on base* (24%) and yes, *off base* (24%).

Of the 24% of respondents who received medical care at a military medical treatment facility, 42%²⁸ indicated they received a SAFE for evidence collection (33% indicated they *received care on base* and 8% indicated they *received care off base*; Figure 32). Fifty-eight percent of respondents indicated *no*, they did not receive a SAFE for evidence collection.

Figure 32.
Received SAFE for Evidence Collection for Those Who Received Care at Military Facility



2014 SES Q29

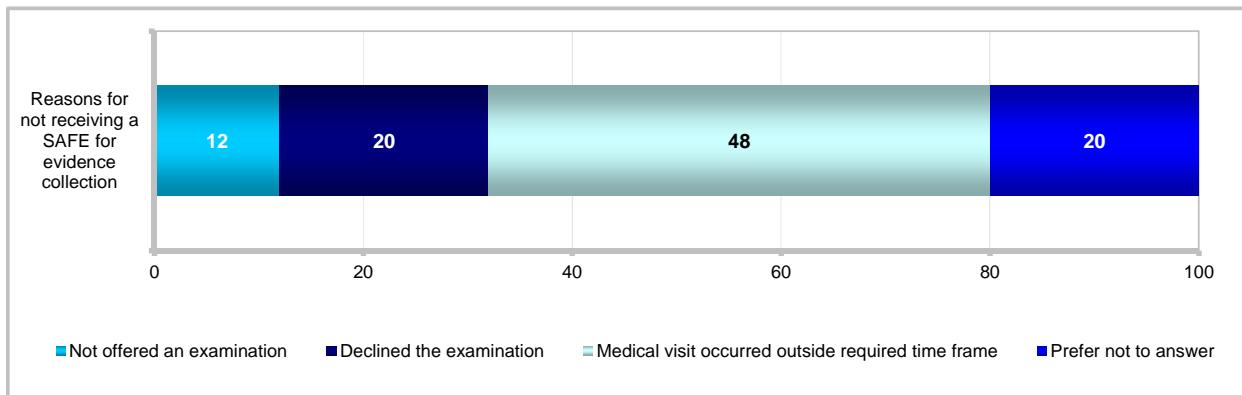
Percent of respondents who took the survey and received medical care at a military facility. Eligible number of respondents is 36.

Knowing that over half of respondents who received medical care did not receive a SAFE (51% at a military or civilian treatment facility and 58% at a military medical treatment facility only) raises questions as to why they did not receive this examination. Specifically, the Department is interested in whether the respondent was offered the SAFE and declined, or not offered a SAFE at all. In addition, the respondent may have received medical care outside the time frame to collect evidence. To better understand these situations, the SES asks for reasons why the respondent did not receive a SAFE.

²⁸ Due to rounding, the percentage for “received a SAFE for evidence collection” is 42% and not 41% as is the summation of *yes, on base* (33%) and *yes, off base* (8%).

Of the 17% of respondents who received medical care (at a military or civilian treatment facility) and did not receive a SAFE for evidence collection,²⁹ nearly half (48%) indicated the *medical visit occurred outside the required time frame* (Figure 33). Twelve percent indicated they were *not offered an examination*, 20% indicated they *declined the examination*, and 20% indicated they *preferred not to answer* the question.

Figure 33.
Reasons for Not Receiving a SAFE for Evidence Collection



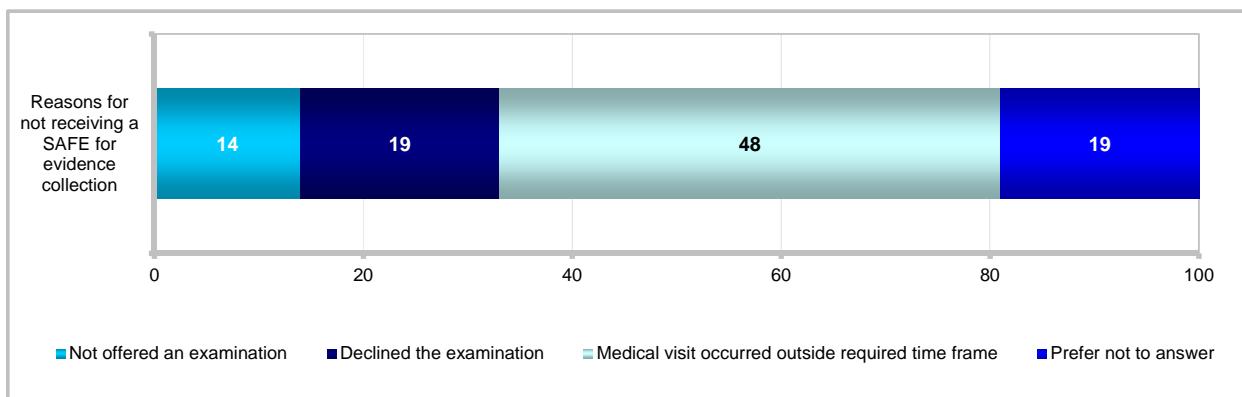
2014 SES Q30

Percent of respondents who took the survey, received medical care, and did not receive a SAFE. Eligible number of respondents is 25.

²⁹ Thirty-three percent of respondents indicated they received medical care (at a military or civilian treatment facility). Of this 33% of respondents, 51% indicated they did not receive a SAFE for evidence collection. This equates to 17% of respondents who received medical care (at a military or civilian treatment facility) and did not receive a SAFE for evidence collection.

Of the 14% of respondents who received medical care at a military medical treatment facility and did not receive a SAFE for evidence collection,³⁰ nearly half (48%) indicated the *medical visit occurred outside the required time frame* (Figure 34). Fourteen percent indicated they were *not offered an examination*, 19% indicated they *declined the examination*, and 19% indicated they *preferred not to answer* the question.

Figure 34.
Reasons for Not Receiving a SAFE for Evidence Collection for Those Who Received Care at Military Facility



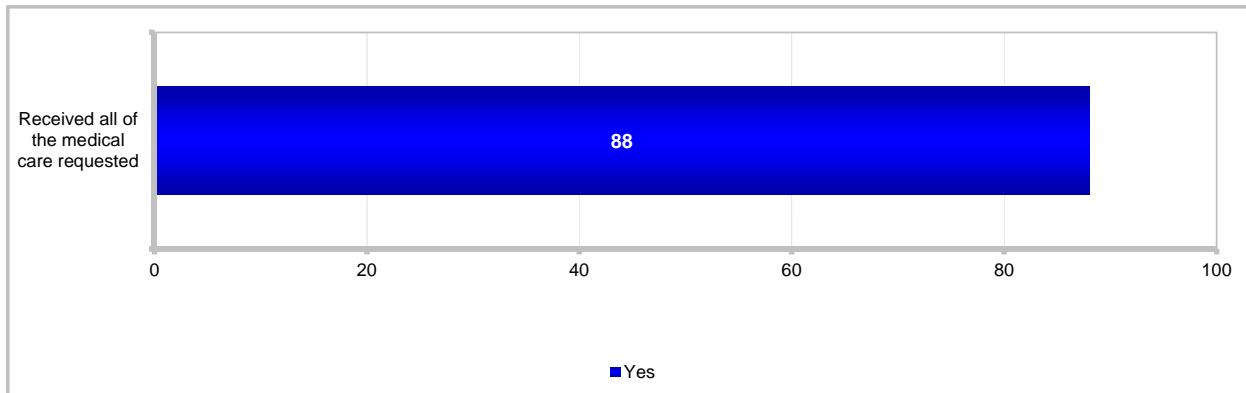
2014 SES Q30

Percent of respondents who took the survey, received medical care at a military facility, and did not receive a SAFE. Eligible number of respondents is 21.

³⁰ Twenty-four percent of respondents indicated they received medical care at a military treatment facility. Of this 24% of respondents, 58% indicated they did not receive a SAFE for evidence collection. This equates to 14% of respondents who received medical care (at a military or civilian treatment facility) and did not receive a SAFE for evidence collection.

Of the 33% of respondents who received medical care (at a military or civilian treatment facility), the majority (88%) indicated that they received all of the medical care they requested (Figure 35).

Figure 35.
Received All the Medical Care Requested

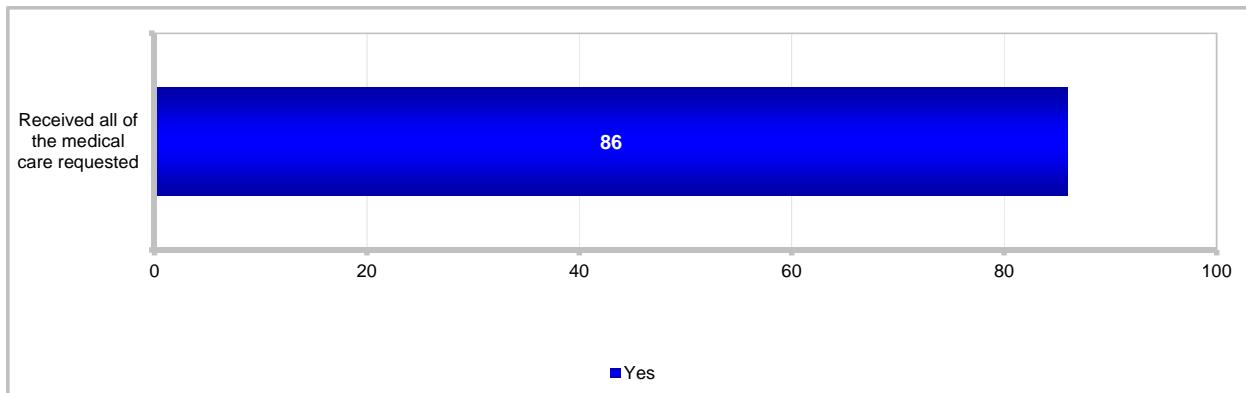


2014 SES Q31

Percent of applicable respondents who took the survey and received medical care. Eligible number of respondents is 49.

Of the 24% of respondents who received medical care at a military medical treatment facility, the majority (86%) indicated that they received all of the medical care they requested (Figure 36).

Figure 36.
Received All the Medical Care Requested for Those Who Received Care at Military Facility

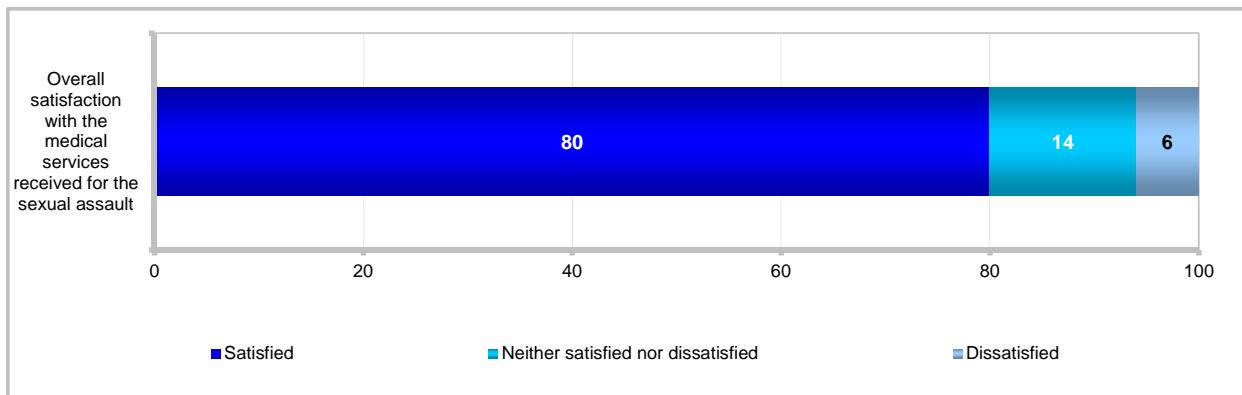


2014 SES Q31

Percent of applicable respondents who took the survey and received medical care at a military facility. Eligible number of respondents is 36.

Of the 33% of respondents who received medical care (at a military or civilian treatment facility), the majority (80%) indicated that overall they were *satisfied* with the medical services received for the sexual assault, whereas 6% indicated they were *dissatisfied* (Figure 37).

Figure 37.
Overall Satisfaction With Medical Services for the Sexual Assault

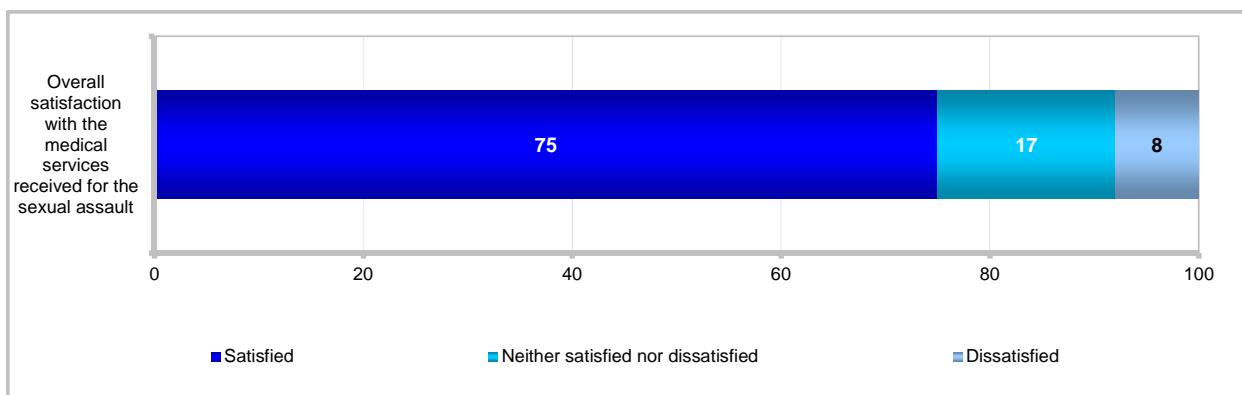


2014 SES Q32

Percent of respondents who took the survey and received medical care. Eligible number of respondents is 49.

Of the 24% of respondents who received medical care at a military medical treatment facility, three-quarters (75%) indicated that overall they were *satisfied* with the medical services received for the sexual assault, whereas 8% indicated they were *dissatisfied* (Figure 38).

Figure 38.
Overall Satisfaction With Medical Services for the Sexual Assault for Those Who Received Care at Military Facility



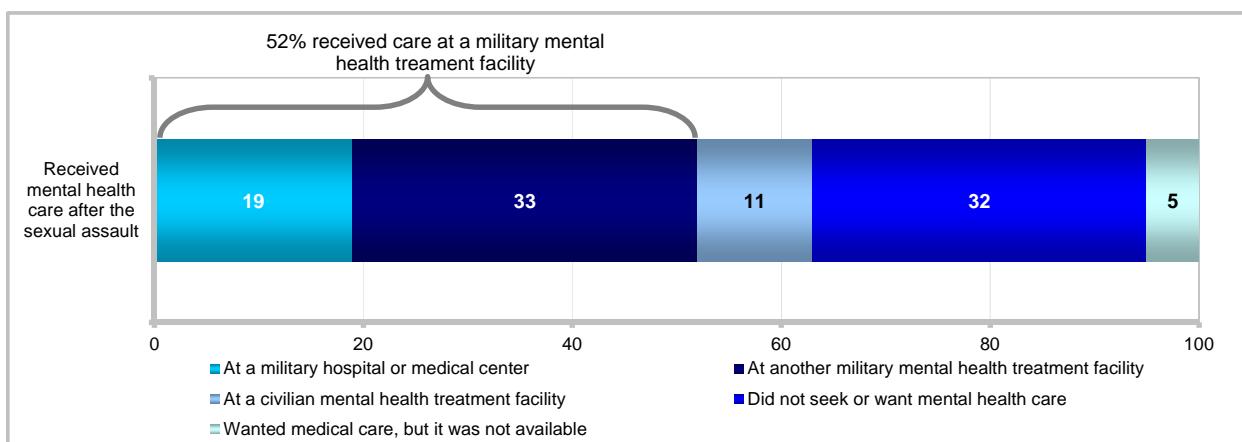
2014 SES Q32

Percent of respondents who took the survey and received medical care at a military facility. Eligible number of respondents is 36.

Mental Health Care

Nearly two-thirds of respondents (63%)³¹ indicated they received mental health care after the sexual assault (19% indicated the mental health care was *at a military hospital or medical center*, 33% *at another military mental health treatment facility*, and 11% *at a civilian mental health treatment facility*; Figure 39). Thirty-two percent of respondents indicated they *did not seek or want mental health care* and 5% indicated they *wanted mental health care, but it was not available*. Overall, 52% received care at some military mental health treatment facility.

Figure 39.
Received Mental Health Care After Sexual Assault



2014 SES Q33

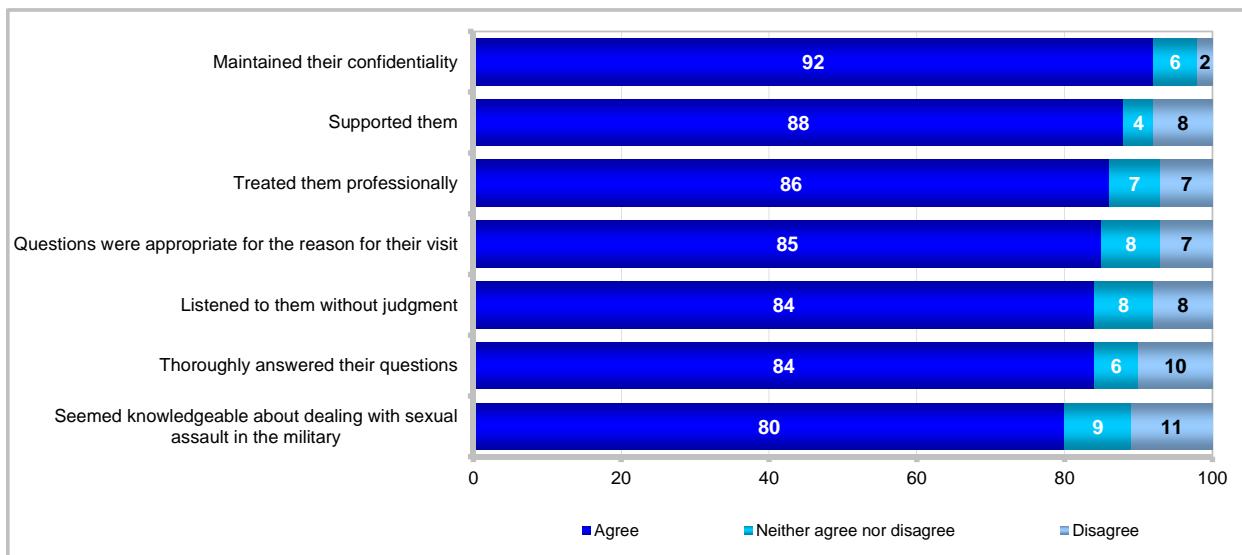
Percent of all respondents who took the survey. Eligible number of respondents is 146.

For the remaining items in this section, results will be provided for all survey respondents regardless of where they received care (military or civilian treatment facility) and then specifically for those respondents who received care at a military mental health facility.

³¹ Although 71% of respondents indicated in Figure 10 that they interacted with a mental health provider, this does not necessarily mean they received mental health services after the sexual assault. With that in mind, all respondents were asked on the survey whether they received mental health care after the sexual assault.

Of the 63% of respondents who received mental health care (at a military or civilian treatment facility), the majority *agreed* the provider *maintained their confidentiality* (92%), *supported them* (88%), *treated them professionally* (86%), *asked questions that were appropriate for the reason for their visit* (85%), *listened to them without judgment* and *thoroughly answered their questions* (both 84%), and *seemed knowledgeable about dealing with sexual assault in the military* (80%; Figure 40). Across these items, fewer respondents (between 2%-11%) indicated they *disagreed* with these assessments.

Figure 40.
Assessment of Mental Health Care for the Sexual Assault

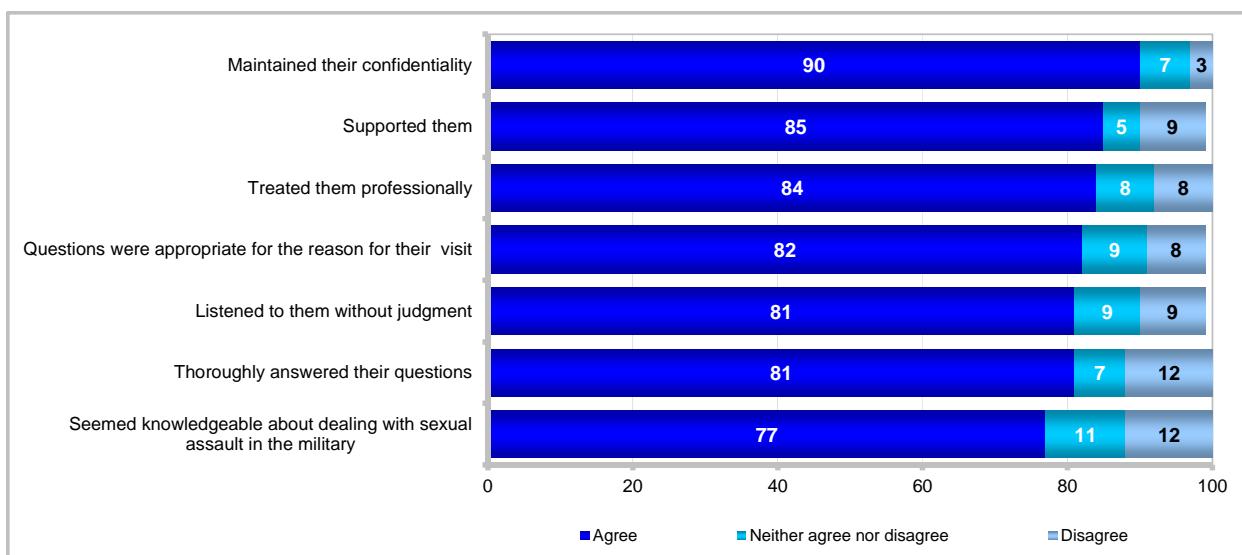


2014 SES Q34

Percent of applicable respondents who took the survey and received mental health care. Eligible number of respondents across these items ranges from 88 to 90.

Of the 52% of respondents who received care at a military mental health treatment facility, the majority *agreed* the provider *maintained their confidentiality* (90%), *supported them* (85%), *treated them professionally* (84%), *asked questions that were appropriate for the reason for their visit* (82%), *listened to them without judgment* and *thoroughly answered their questions* (both 81%), and *seemed knowledgeable about dealing with sexual assault in the military* (77%; Figure 41). Across these items, fewer respondents (between 3%-12%) indicated they *disagreed* with these assessments.

Figure 41.
Assessment of Mental Health Care for the Sexual Assault for Those Who Received Care at Military Facility

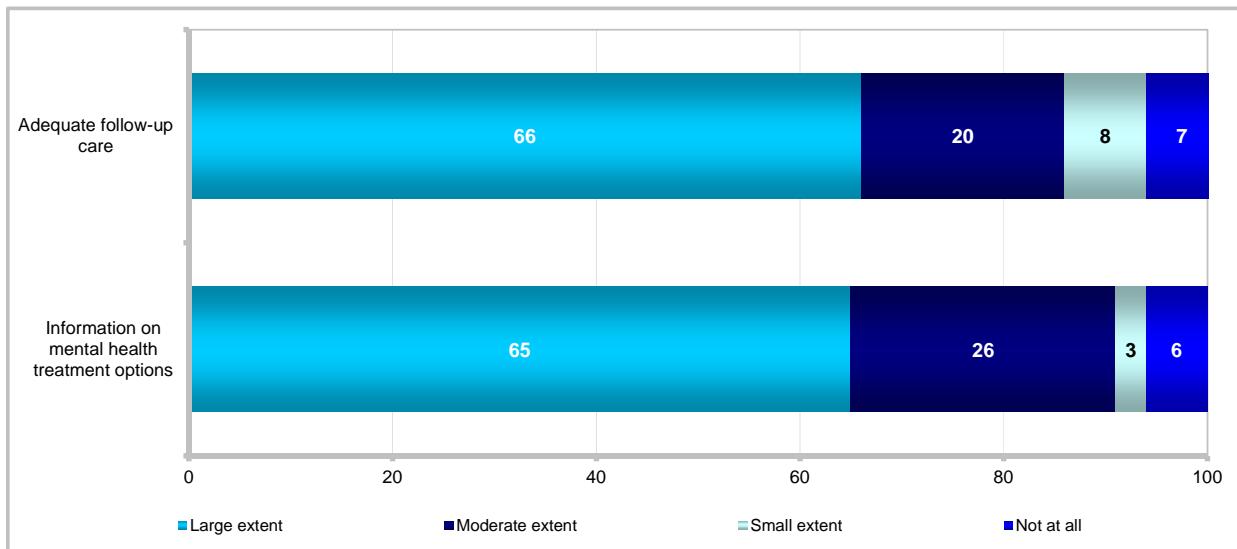


2014 SES Q34

Percent of applicable respondents who took the survey and received mental health care at a military facility.
 Eligible number of respondents across these items ranges from 73 to 75.

Of the 63% of respondents who received mental health care (at a military or civilian treatment facility), about two-thirds indicated, to a *large extent*, they were provided *adequate follow-up care* (66%) and *information on mental health treatment options* (65%; Figure 42). Between 20%-26% indicated they were provided the items to a *moderate extent*, 3%-8% to a *small extent*, and between 6%-7% indicated they were *not at all* provided these items.

Figure 42.
Extent of Assistance Provided by Mental Health Services for the Sexual Assault



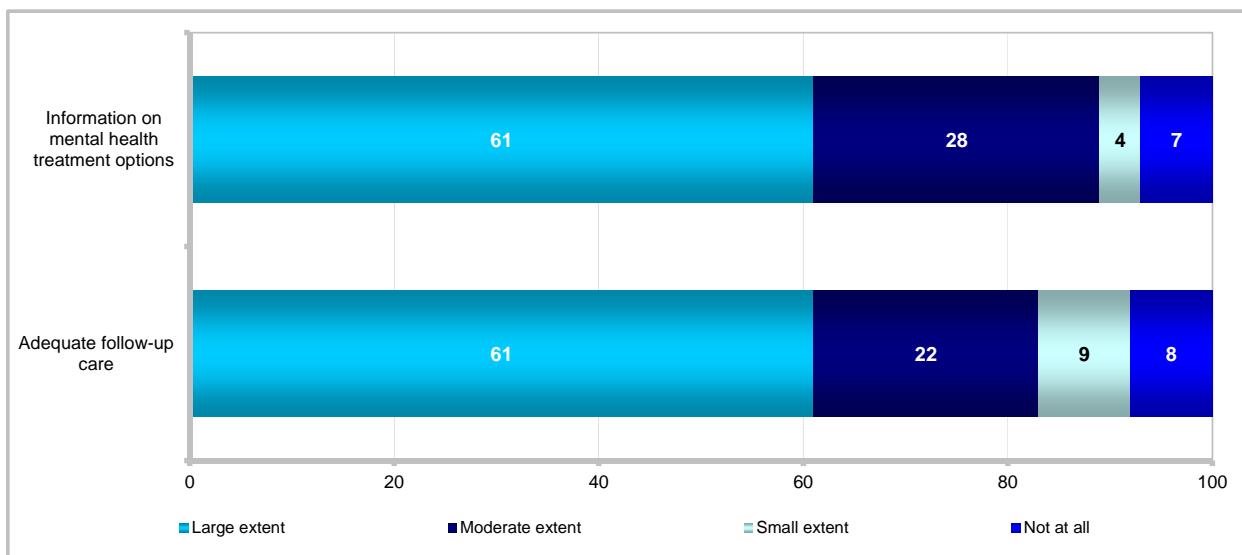
2014 SES Q35

Percent of applicable respondents who took the survey and received mental health care. Eligible number of respondents across these items ranges from 88 to 91.

Of the 52% of respondents who received medical care at a military mental health treatment facility, 61% indicated, to a *large extent*, they were provided *information on mental health treatment options* and *adequate follow-up care* (Figure 43). About a quarter (22%-28%) indicated they were provided the items to a *moderate extent*, 4%-9% to a *small extent*, and between 7%-8% indicated they were *not at all* provided these items.

Figure 43.

Extent of Assistance Provided by Mental Health Services for the Sexual Assault for Those Who Received Care at Military Facility

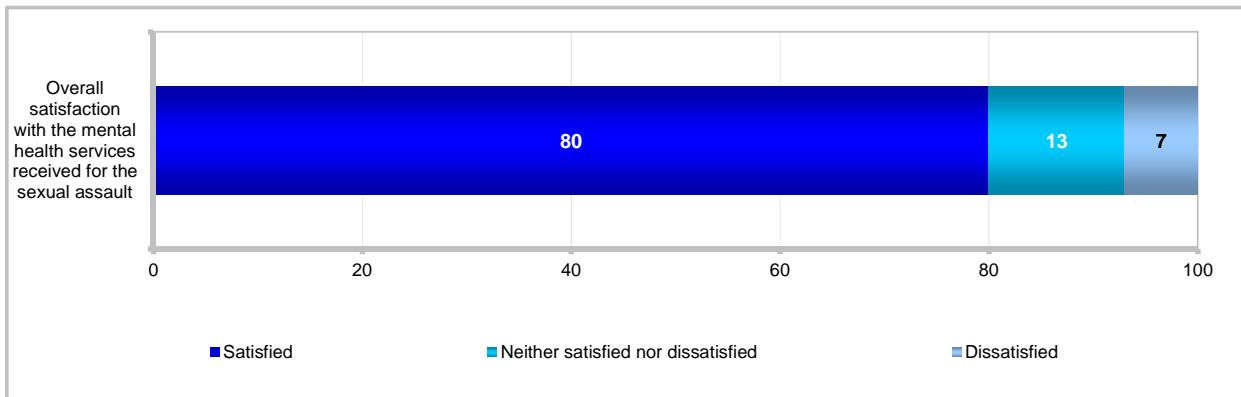


2014 SES Q35

Percent of applicable respondents who took the survey and received mental health care at a military facility.
Eligible number of respondents across these items ranges from 74 to 76.

Of the 63% of respondents who received mental health care (at a military or civilian treatment facility), the majority (80%) indicated that overall they were *satisfied* with the mental health services received for the sexual assault, whereas 7% indicated they were *dissatisfied* (Figure 44).

Figure 44.
Overall Satisfaction With Mental Health Services for the Sexual Assault



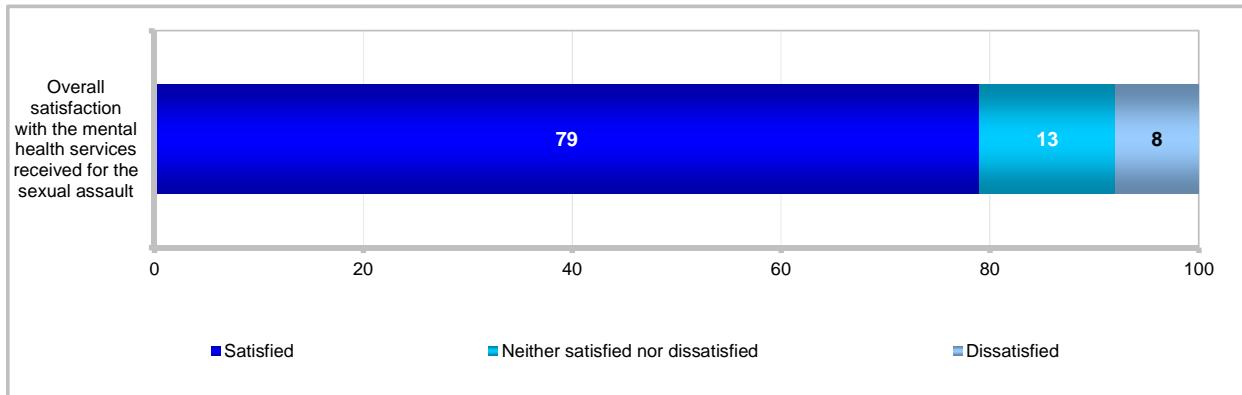
2014 SES Q36

Percent of applicable respondents who took the survey and received mental health care. Eligible number of respondents is 92.

Of the 52% of respondents who received medical care at a military mental health treatment facility, the majority (79%) indicated that overall they were *satisfied* with the mental health services received for the sexual assault, whereas 8% indicated they were *dissatisfied* (Figure 45).

Figure 45.

Overall Satisfaction With Mental Health Services for the Sexual Assault for Those Who Received Care at Military Facility



2014 SES Q36

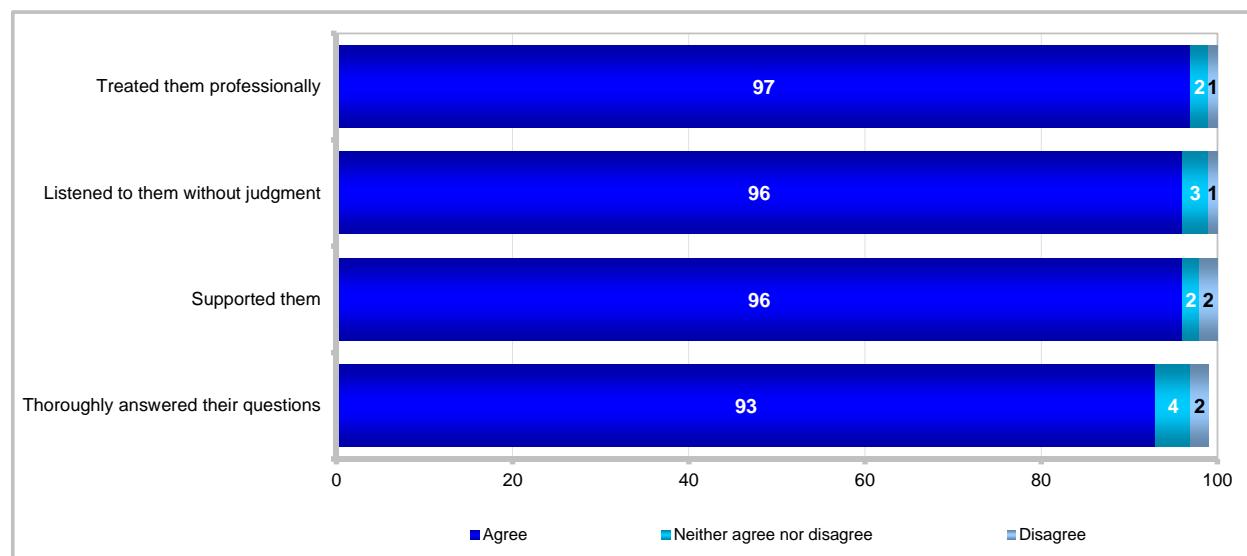
Percent of applicable respondents who took the survey and received mental health care at a military facility.
Eligible number of respondents is 76.

Chapter 5: Experiences and Satisfaction With Special Victims' Counsel/Victims' Legal Counsel

The Department recognizes the legal process for a sexual assault can be difficult for any survivor, military or civilian. In 2013, after approving an Air Force pilot program that assigned special counsel to victims who reported a sexual assault, the Secretary of Defense directed the Secretaries of the Military Departments to implement the program in their respective Services (Secretary of Defense, 2013). Special Victims' Counsel/Victims' Legal Counsel (SVC/VLC), act as legal counsel for the survivor to provide advocacy, support, and act as the intermediary between the prosecutors and the survivor. The SES asks respondents a variety of questions about their general experiences and satisfaction with SVC/VLC. While these resources are most often utilized by unrestricted reporters with open investigations, the Department allows restricted reporters to confer with SVC/VLC to obtain legal information and to establish an attorney-client relationship. Therefore, this section includes both unrestricted and restricted reporters. Results are presented for survey respondents at the Total DoD level.

Of the 68% of respondents who used a SVC/VLC, a large majority *agreed* the SVC/VLC *treated them professionally* (97%), *listened to them without judgment* and *supported them* (both 96%), and *thoroughly answered their questions* (93%). Across these items, fewer respondents indicated they *disagreed* (between 1%-2%; Figure 46).

Figure 46.
Assessment of Special Victims' Counsel/Victims' Legal Counsel (SVC/VLC)



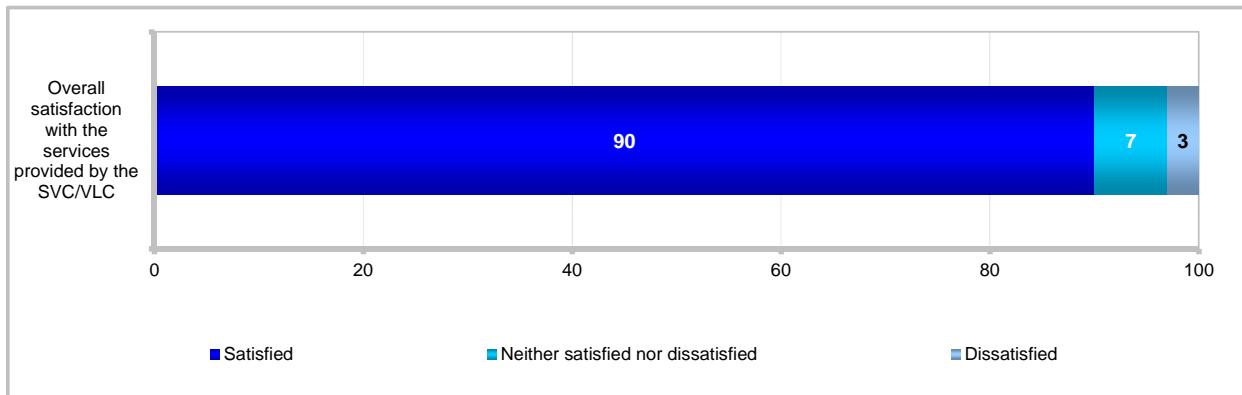
2014 SES Q37

Percent of applicable respondents who took the survey and used a SVC/VLC. Eligible number of respondents across these items ranges from 91 to 92.

Of the 68% of respondents who interacted with a SVC/VLC, most (90%) indicated they were *satisfied* with the services provided by the SVC/VLC, whereas 3% indicated they were *dissatisfied* (Figure 47).

Figure 47.

Overall Satisfaction With Services Provided by the Special Victims' Counsel/Victims' Legal Counsel (SVC/VLC)



2014 SES Q38

Percent of applicable respondents who took the survey and used a SVC/VLC. Eligible number of respondents is 98.

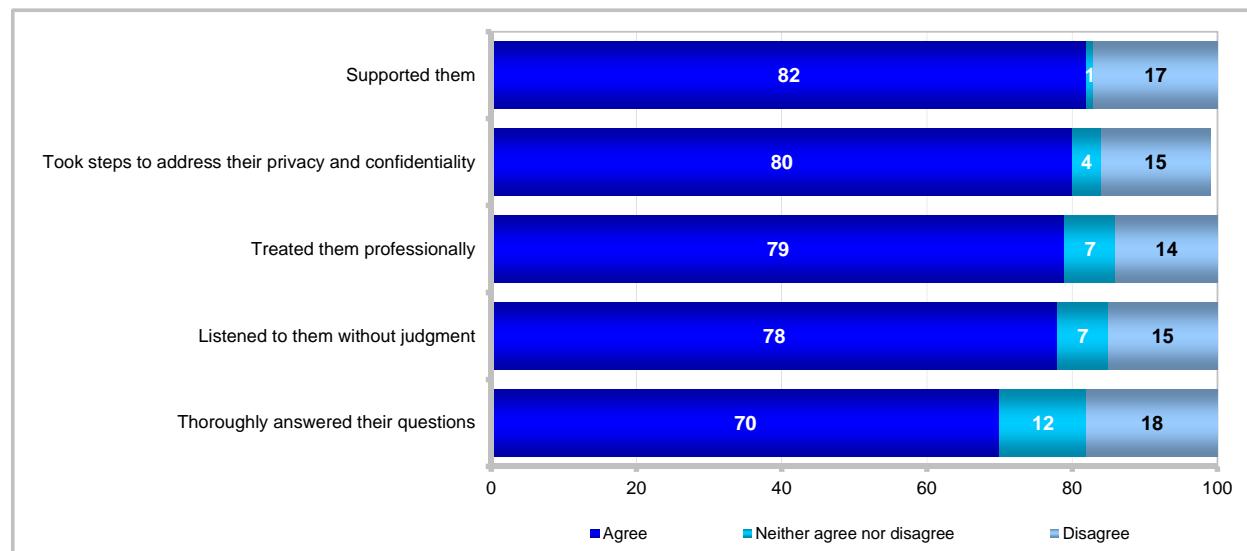
Chapter 6: Response of Chain of Command

Another data element of interest to the Department is the response of the sexual assault survivor's chain of command, if notified of the incident. When a sexual assault survivor makes an unrestricted report, it prompts an official investigation and command notification. The 2014 SES asks respondents who interacted with members in their unit as a result of the sexual assault report about the response of their unit commander/director and other members in their chain of command (e.g., senior enlisted advisor, immediate supervisor). These survey items are applicable only to unrestricted reporters by policy and therefore we present percentages for unrestricted reporters only. Results are presented for survey respondents at the Total DoD level.

Of the 64% of respondents who made an unrestricted report and spoke to their unit commander/director in response to the sexual assault, more than two-thirds *agreed* the unit commander/director *supported them* (82%), *took steps to address their privacy and confidentiality* (80%), *treated them professionally* (79%), *listened to them without judgment* (78%), and *thoroughly answered their questions* (70%). Across these items, less than one-fifth (between 14%-18%) of respondents indicated they *disagreed* (Figure 48).

Figure 48.

Assessment of the Unit Commander/Director's Response to Report of Sexual Assault for Unrestricted Reporters



2014 SES Q41

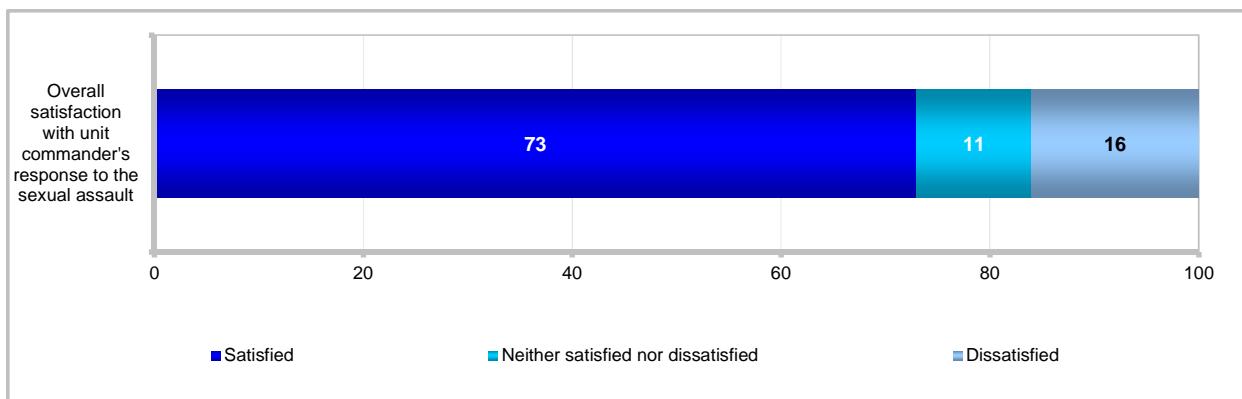
Percent of applicable respondents who took the survey, spoke to unit commander/director, and made an unrestricted report. Eligible number of respondents across these items ranges from 66 to 71.

Of the 64% of respondents who made an unrestricted report and spoke to their unit commander/director in response to the sexual assault, almost three-quarters (73%) indicated that

overall they were *satisfied* with the unit commander/director's response to the report of sexual assault, whereas 16% indicated they were *dissatisfied* (Figure 49).

Figure 49.

Overall Satisfaction With Response of Unit Commander/Director to Report of Sexual Assault for Unrestricted Reporters

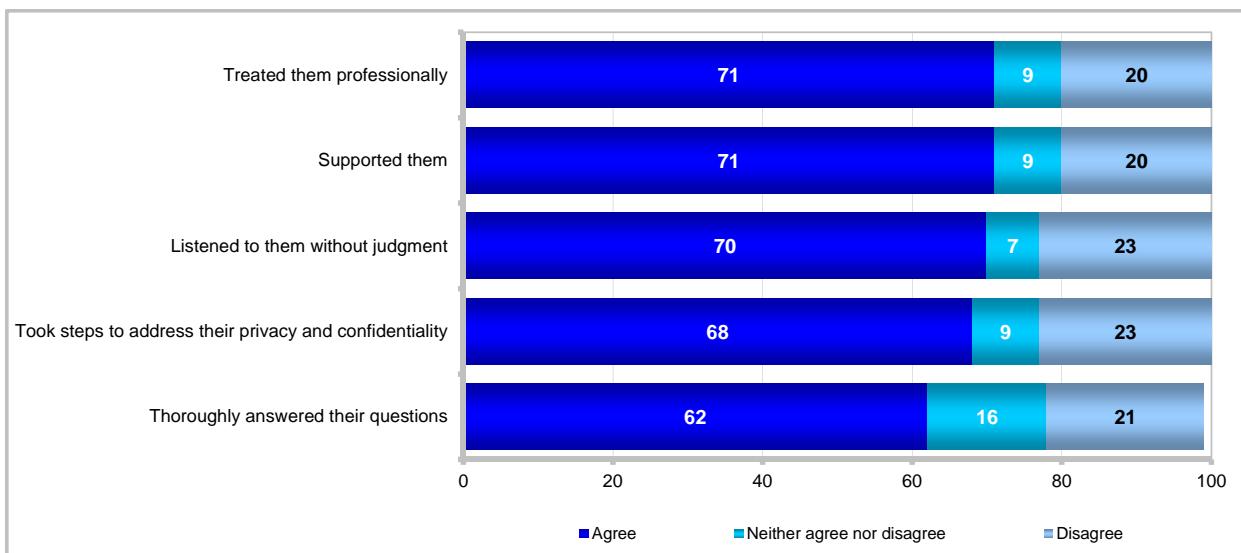


2014 SES Q42

Percent of respondents who took the survey, spoke to unit commander/director, and made an unrestricted report.
Eligible number of respondents is 74.

Of the 81% of respondents who made an unrestricted report and spoke to another member in their chain of command (e.g., senior enlisted advisor or immediate supervisor) in response to the sexual assault, more than two-thirds *agreed* the other member in their chain of command *treated them professionally and supported them* (both 71%), *listened to them without judgment* (70%), *took steps to address their privacy and confidentiality* (68%), and *thoroughly answered their questions* (62%; Figure 50). Across these items, about one-fifth (20%-23%) indicated they *disagreed*.

Figure 50.
Assessment of Another Member in Chain of Command's Response to Sexual Assault for Unrestricted Reporters



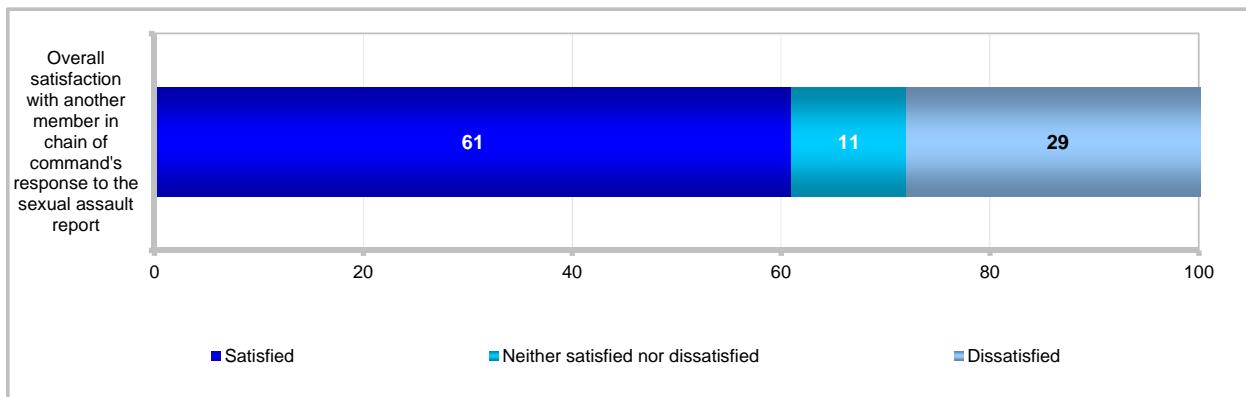
2014 SES Q43

Percent of applicable respondents who took the survey, spoke to another member in chain of command, and made an unrestricted report. Eligible number of respondents across these items ranges from 85 to 91.

Of the 81% of respondents who made an unrestricted report and spoke to another member in their chain of command in response to the sexual assault, about two-thirds (61%) indicated that overall they were *satisfied* with the other member's response to the report of sexual assault (Figure 51). More than one-quarter (29%) indicated they were *dissatisfied* with the other member's response to the sexual assault.

Figure 51.

Overall Satisfaction With Response of Another Member in Chain of Command to Report of Sexual Assault for Unrestricted Reporters



2014 SES Q44

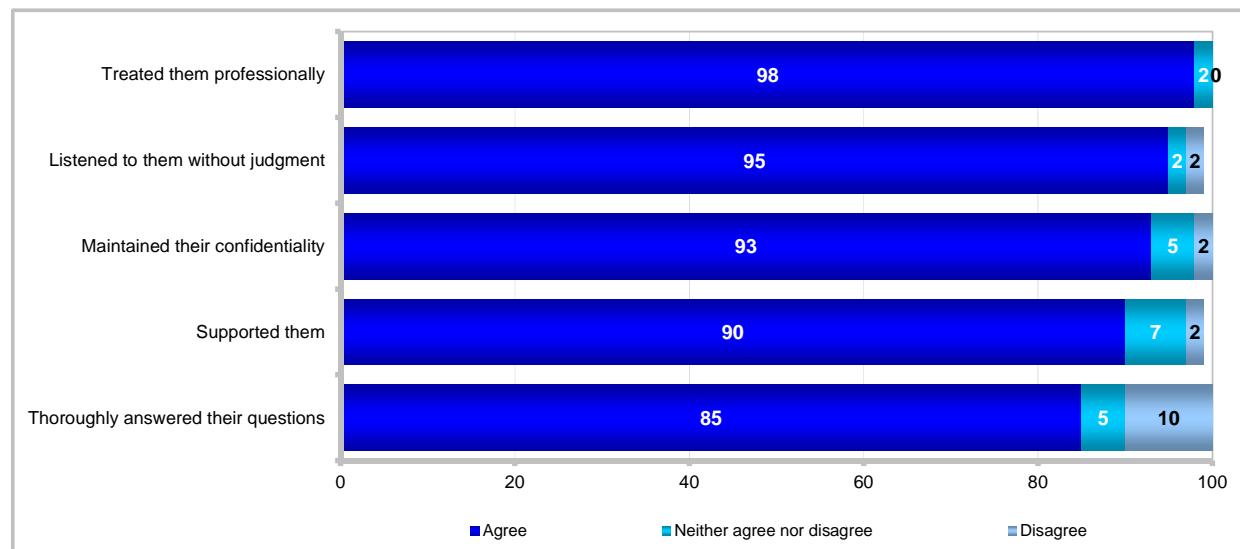
Percent of respondents who took the survey, spoke to another member in chain of command, and made an unrestricted report. Eligible number of respondents is 94.

Chapter 7: Experiences and Satisfaction With Chaplains

While chaplains do not take restricted or unrestricted reports, they provide a confidential source of pastoral care for survivors of sexual assault. Chaplains are not mandatory reporters, so survivors who make a restricted report can speak to a chaplain without triggering an official investigation or command notification. Nearly one-third of respondents (31%) indicated they interacted with a chaplain as a result of the sexual assault. Respondents are asked on the SES about their satisfaction with the services and support the chaplain provided. Survey items include whether the chaplain provided the respondent support, listened to him/her without judgment, and treated him/her professionally. An additional item includes the respondent's overall satisfaction with the services provided by the chaplain. Results are presented for survey respondents at the Total DoD level.

Of the 31% of respondents who used chaplain services as a result of the sexual assault, the majority *agreed* the chaplain *treated them professionally* (98%), *listened to them without judgment* (95%), *maintained their confidentiality* (93%), *supported them* (90%), and *thoroughly answered their questions* (85%; Figure 52). Fewer respondents (between 0%-10%) indicated across these items that they *disagreed*.

Figure 52.
Assessment of Chaplain Services Related to the Sexual Assault

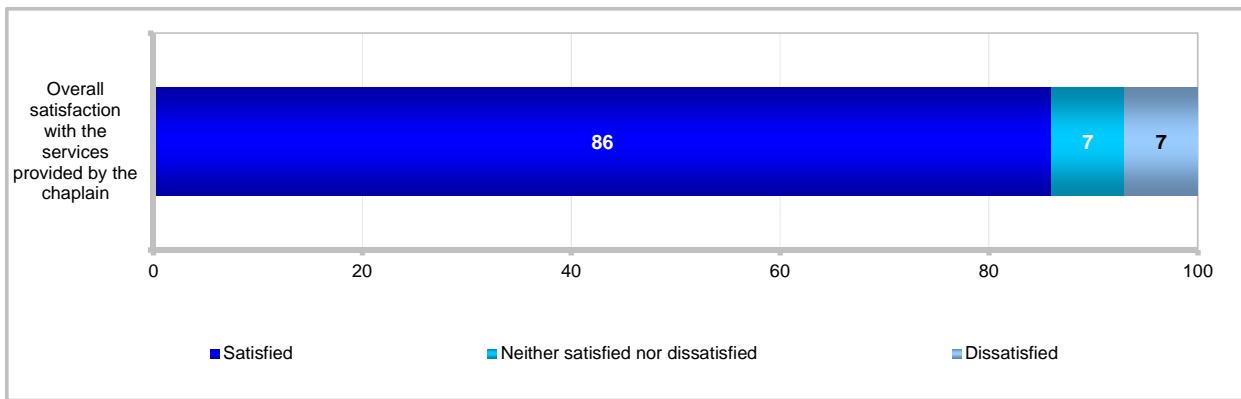


2014 SES Q39

Percent of applicable respondents who took the survey and used chaplain services. Eligible number of respondents across these items ranges from 41 to 42.

Of the 31% of respondents who used chaplain services as a result of the sexual assault, the majority (86%) indicated that overall they were *satisfied* with the services provided by the chaplain, whereas 7% indicated they were *dissatisfied* (Figure 53).

Figure 53.
Overall Satisfaction With Chaplain Services After the Sexual Assault



SES Q40

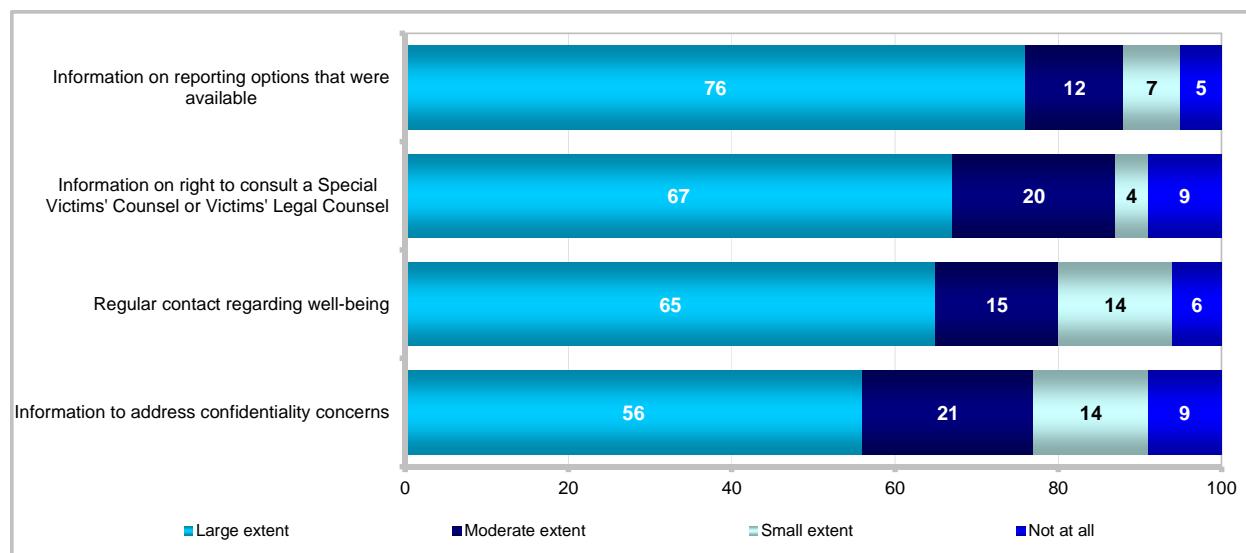
Percent of respondents who took the survey and used chaplain services. Eligible number of respondents is 42.

Chapter 8: Overall Experience With the Reporting Process

This section provides information on the respondent's overall experience with the Sexual Assault Prevention and Response (SAPR) program as a result of reporting a sexual assault. This includes details on whether the respondent believed he/she experienced retaliation after reporting, the overall importance of various SAPR needs throughout the reporting process, and whether the respondent would recommend others report their sexual assault. Results are presented for survey respondents at the Total DoD level.

More than half of respondents indicated, to a *large extent*, they were provided assistance with *information on the available reporting options* (76%), *information on the right to consult either a SVC or a VLC* (67%), *regular contact regarding their well-being* (65%), and *information to address confidentiality concerns* (56%; Figure 53). Between 12%-21% indicated they were provided assistance across those items to a *moderate extent*, 4%-14% to a *small extent*, and 5%-9% indicated they were *not at all* provided assistance with these items.

Figure 53.
Extent of Assistance Provided by Resources/Services After Reporting



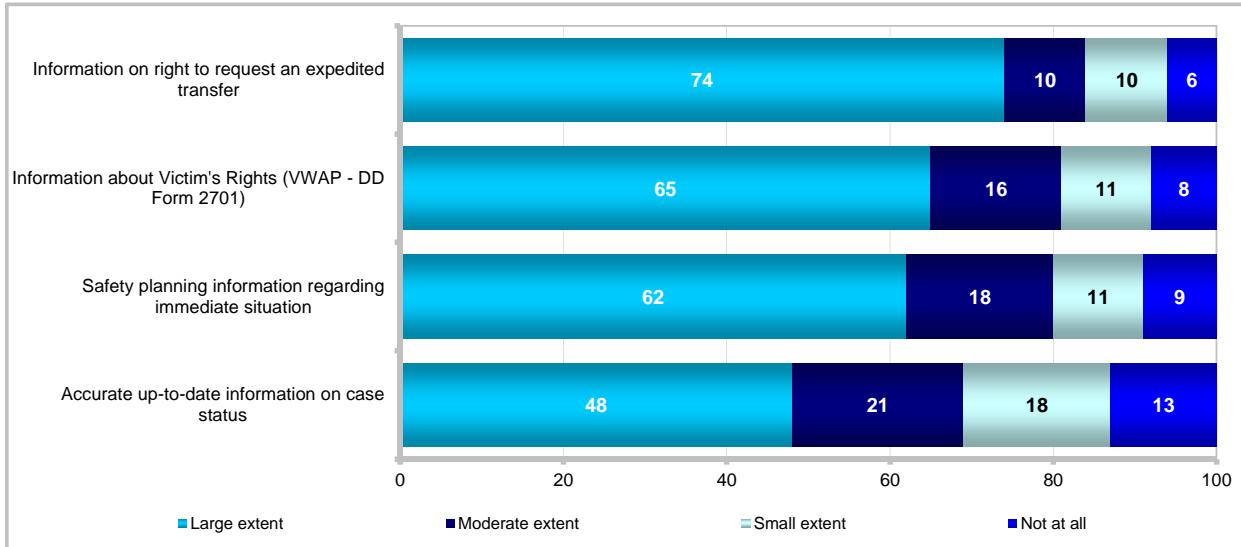
2014 SES Q45c, d, e, and f
Percent of applicable respondents who took the survey. Eligible number of respondents across these items ranges from 117 to 134.

Some resources/services are only applicable to unrestricted reporters. Of the 80% of respondents who made an unrestricted report, about three-quarters of respondents (74%) indicated, to a *large extent*, they were provided *information on the right to request an expedited transfer* (Figure 54). A little less than two-thirds indicated, to a *large extent*, they were provided *information about Victim's Rights (VWAP – DD Form 2701; 65%)* and *safety planning information regarding the immediate situation* (62%). Nearly half of respondents (48%)

indicated, to a *large extent*, they were provided *accurate up-to-date information on case status*. Between 10%-21% of respondents indicated they were provided assistance across those items to a *moderate extent*, between 10%-18% to a *small extent*, and 6%-13% indicated they were *not at all* provided these items.

Figure 54.

Extent of Assistance Provided by Resources/Services After Reporting for Unrestricted Reporters

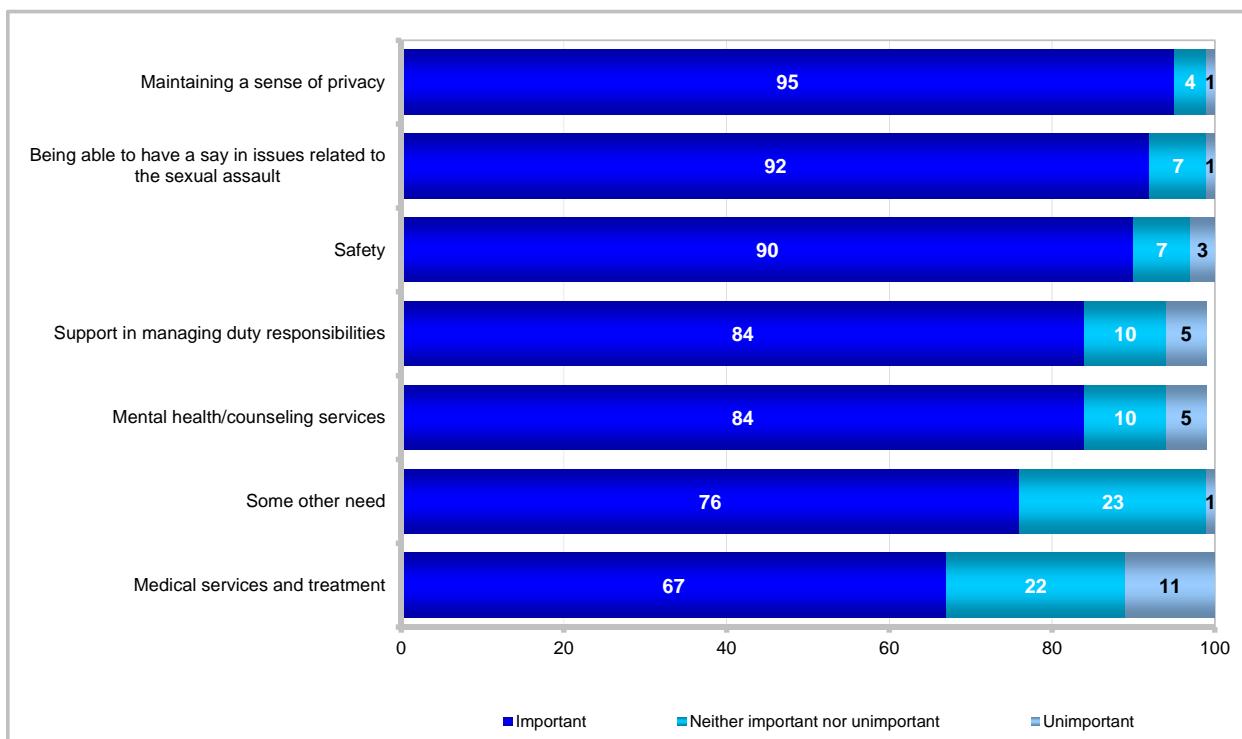


2014 SES Q45a, b, g, and h

Percent of applicable respondents who took the survey and made an unrestricted report. Eligible number of respondents across these items ranges from 100 to 109.

The Department is interested in understanding the ongoing needs of survivors to better serve these individuals both now and in the future. To capture this, respondents were asked about the importance of various issues during the reporting process. As shown in Figure 55, more than two-thirds of respondents indicated the following were *important* during the sexual assault reporting process: *maintaining a sense of privacy* (95%), *being able to have a say in issues related to the sexual assault* (92%), *safety* (90%), *support in managing duty responsibilities* and *mental health/counseling services* (both 84%), *some other need* (76%), and *medical services and treatment* (67%). Across these items, fewer respondents (between 1%-11%) indicated these needs were *unimportant*.

Figure 55.
Overall Importance of Sexual Assault Resources During the Reporting Process



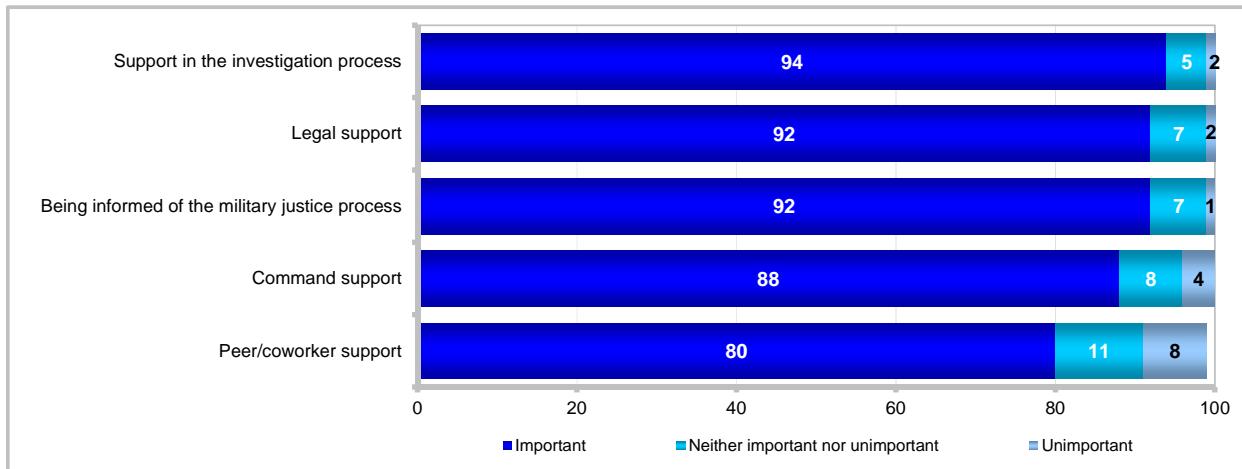
2014 SES Q46a, b, c, i, j, k, and l

Percent of applicable respondents who took the survey. Eligible number of respondents across these items ranges from 106 to 138.

For the 80% of unrestricted reporters, the majority of respondents indicated the following were *important* during the sexual assault reporting process: *support in the investigation process* (94%), *legal support* and *being informed of the military justice process* (both 92%), *command support* (88%), and *peer/coworker support* (80%; Figure 56). Across these items, fewer respondents (between 1%-8%) indicated these needs were *unimportant*.

Figure 56.

Overall Importance of Sexual Assault Resources During the Reporting Process for Unrestricted Reporters

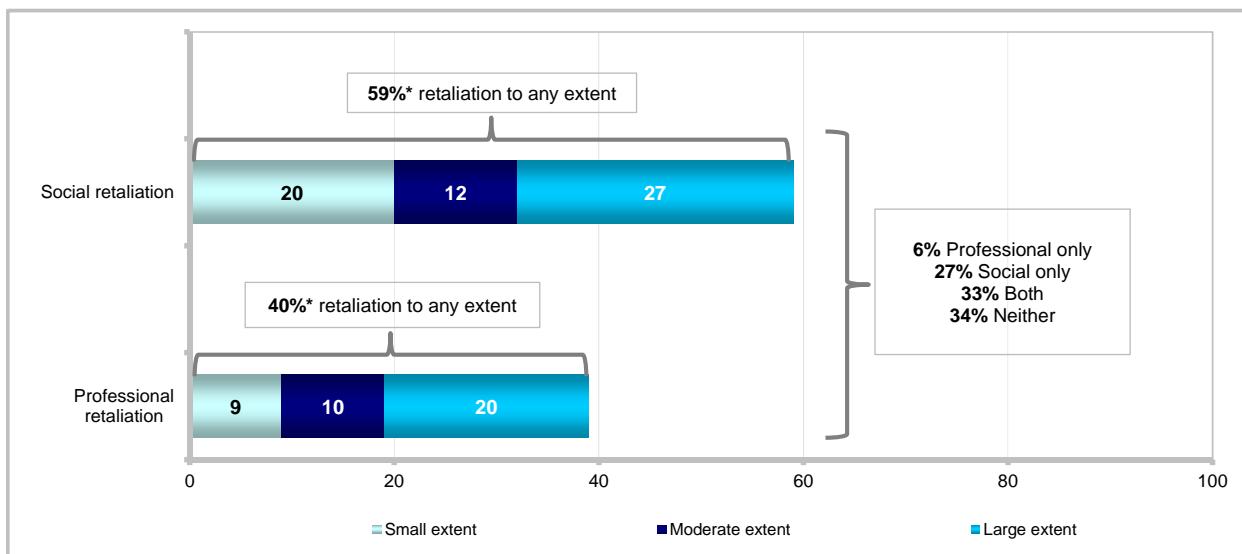


2014 SES Q46d, e, f, g, and h

Percent of respondents who took the survey and had an unrestricted report. Eligible number of respondents across these items ranges from 107 to 113.

The Department continues to work towards eliminating potential retaliation against survivors who make reports of sexual assault. To gauge this, respondents were asked about their perceived experiences with two types of retaliation: social retaliation (e.g., ignored by coworkers, blamed for the situation, made to feel responsible for changes in the unit) and professional retaliation (e.g., loss of privileges, denied promotion/training, transferred to less favorable job, unwanted increased supervision).³² As shown in Figure 57, of the 80% of respondents who made an unrestricted report, 59% of respondents indicated they believed they experienced *social retaliation* to some extent since they reported their sexual assault (27% to a *large extent*, 12% to a *moderate extent*, and 20% to a *small extent*). Slightly less (40%) indicated they believed they experienced *professional retaliation* to some extent since they reported their sexual assault (20% to a *large extent*, 10% to a *moderate extent*, and 9% to a *small extent*). Figure 57 also provides a breakout of respondents who believed they experienced one or both types of retaliation. Overall, one-third of respondents (33%) believed they experienced both *social* and *professional* retaliation since reporting their sexual assault.

Figure 57.
Perceived Retaliation Since Reporting for Unrestricted Reporters



2014 SES Q47

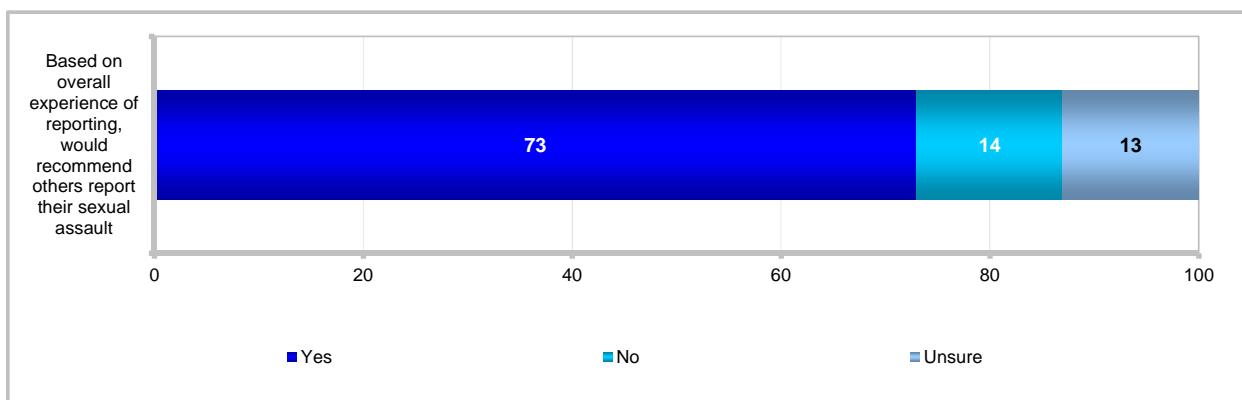
Percent of applicable respondents who took the survey and had an unrestricted report. Eligible number of respondents across these items ranges from 108 to 111.

*Due to rounding the percentage who believed they experienced social retaliation to any extent (59%) is not equivalent to the summation of social retaliation only (27%) and both social and professional retaliation (33%). Similarly, the percentage who believed they experienced professional retaliation to any extent (40%) is not equivalent to the summation of professional retaliation only (6%) and both social and professional retaliation (33%).

³² This measure captures behaviors that some survivors perceive as professional retaliation. Additional information will be collected in 2015 to better understand the experiences of survivors who believe they experienced social and/or professional retaliation.

In the DMDC 2012 *Workplace and Gender Relations Survey of Active Duty Members* (2012 WGRA), 28% of active duty members who experienced an unwanted sexual contact in the last 12 months and did *not* report it, indicated that one reason they did not report was because they *heard about negative experiences other victims went through who reported their situation* (DMDC 2013). Given the potential impact of one survivor's experience on the future decisions of others survivors to report, one of the ways the Department measures progress is whether respondents who report a sexual assault would recommend others report as well. In the 2014 SES, nearly three-quarters of respondents (73%) indicated based on their overall experience of reporting, *yes*, they would recommend others report their sexual assault, whereas 14% of respondents indicated *no* and 13% were *unsure* if they would recommend others report their sexual assault (Figure 58).

Figure 58.
Would Recommend Others Report Their Sexual Assault



Chapter 9: Future Directions

The *Survivor Experience Survey (SES)* is an ongoing survey and the Department continues to gather data on this important population. As data are collected and analyzed, DMDC-RSSC will provide updated reports and modify the survey instrument to capture emerging issues and topics of interest. In 2015, notification and contact strategies will be modified to attempt to reach more eligible survivors who may not have regular contact with the SARCs, while still maintaining the anonymity of the survey responses and protecting the privacy of the respondent.

In addition to the data gathered on the SES, DMDC-RSSC is also working with the Department to develop a survey for those who have completed the military investigative and justice process in order to evaluate their experiences. In combination, these two surveys will provide the Department with a more thorough understanding of the needs, experiences, and concerns of military survivors of sexual assault.

References

DMDC. (2013). *2012 Workplace and Gender Relations Survey of Active Duty Members: Survey Note and Briefing* (Report No. 2013-007). Alexandria, VA: DMDC.

DoD SAPRO. (2013) DoD Sexual Assault Prevention and Response (SAPR) Strategic Plan. http://www.sapr.mil/public/docs/reports/SecDef_SAPR_Memo_Strategy_Atch_06052013.pdf

National Defense Authorization Act for Fiscal Year 2014. [http://www.gpo.gov/fdsys/pkg/CPRT-113HPRT86280.pdf](http://www.gpo.gov/fdsys/pkg/CPRT-113HPRT86280/pdf/CPRT-113HPRT86280.pdf)

Secretary of Defense. (2013, August 14). *Sexual Assault Prevention and Response* [Memorandum]. Washington, DC: Author.

Secretary of Defense. (2014, May 1). *Sexual Assault Prevention and Response* [Memorandum]. Washington, DC: Author

Turchik, J. A., & Wilson, S. M. (2010). Sexual assault in the US military: A review of the literature and recommendations for the future. *Aggression and Violent Behavior*, 15(4), 267-277.

Appendix A. Dynamic Questionnaire

Dynamic Questionnaire

The *2014 SES* included “dynamic text” to display Service-specific terminology (e.g., Uniformed Victim Advocate [UVA] or Victim Advocate [VA]). This appendix provides the generic survey instrument and, where there was an option for dynamic text, the text is highlighted in yellow. Appendix B provides the dynamic text for these survey items.

BACKGROUND INFORMATION

1. Are you currently a uniformed military member (i.e., Title 10 or Title 32 status even if only part-time)?

- Yes
- No, I have separated or retired

2. What is your age?

- Under 18 years old
- 18-20 years old
- 21-24 years old
- 25-33 years old
- 34-45 years old
- 46-54 years old
- 55 years old or older

3. What is your Service/Reserve component?

- Army
- Army National Guard
- Army Reserve
- Navy
- Navy Reserve
- Marine Corps
- Marine Corps Reserve
- Air Force
- Air National Guard
- Air Force Reserve

It is not necessary to answer every question. You can leave any item unanswered and continue forward through the survey.

4. Are you...

- Male
- Female
- Prefer not to answer

5. What is your rank?

- Enlisted
- Officer

AWARENESS OF RESOURCES

The following questions ask about services and resources relating to the sexual assault. We realize that this is a very sensitive area and appreciate your responses to these questions.

6. Prior to the sexual assault, were you aware of the following resources? Mark one answer for each item. If the resource did not exist at the time of your assault, mark "Did not exist".

	Did not exist		
	No		
	Yes		
a. Sexual Assault Response Coordinator (SARC).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Uniformed Victim Advocate (UVA) or Victim Advocate (VA).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. DoD Safe Helpline (877-995-5247).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Installation 24-hour helpline	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Local civilian 24-hour helpline.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Special Victims' Counsel or Victims' Legal Counsel (attorney assigned to you to represent your interests)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Medical care for survivors of sexual assault (e.g., screening for sexually transmitted diseases [STDs], preventative treatment, any related follow-up medical care).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Sexual Assault Forensic Examinations (SAFE) for survivors of sexual assault	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. Mental health counseling/care for survivors of sexual assault.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. Chaplain services for survivors of sexual assault.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

REPORTING PROCESS

7. Who did you first tell about the sexual assault?

Mark one.

- A friend
- A family member
- Your unit commander/director
- Another member in your chain of command (e.g., your immediate supervisor, First Sergeant)
- A chaplain
- A Sexual Assault Response Coordinator (SARC)
- A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)
- DoD Safe Helpline (877-995-5247)
- A medical provider, not for mental health needs (e.g., someone from a military medical treatment facility or civilian treatment facility)
- A mental health provider (e.g., counselor)
- Military law enforcement (e.g., Security Forces, MPs, Provost Marshall) or criminal investigator (e.g., CID, NCIS, OSI)
- Civilian law enforcement or called 911
- Special Victims' Counsel or Victims' Legal Counsel (attorney assigned to you to represent your interests)
- Some other military individual/organization not listed above
- Some other civilian individual/organization not listed above
- I didn't tell anyone; someone contacted me
- Unable to recall

8. [Ask if Q7 => "A Sexual Assault Response Coordinator (SARC)" AND Q7 => "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)"] Did the individual you first spoke to advise you to contact a Sexual Assault Response Coordinator (SARC) or a Uniformed Victim Advocate (UVA)/Victim Advocate (VA)?

- Yes
- No
- Unable to recall
- These resources did not exist at the time

DoD provides two types of reporting of sexual assault.

- Unrestricted reporting provides medical treatment and counseling services, and triggers an official investigation by a Military Criminal Investigative Organization (e.g., CID, NCIS, OSI) and command notification of the assault.
- Restricted reporting provides medical treatment and counseling services, but does not trigger an official investigation or command notification of the assault.

9. What type of report did you initially make?

Mark one.

- An unrestricted report
- A restricted report
- Command or law enforcement was notified before you could make a reporting option choice
- Unable to recall

10. [Ask if Q9 = "An unrestricted report" OR Q9 = "Command or law enforcement was notified before you could make a reporting option choice"] To whom did you make this initial unrestricted report? **Mark one.**

- A Sexual Assault Response Coordinator (SARC)
- A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)
- A medical provider, not for mental health needs (e.g., someone from a military medical treatment facility or civilian treatment facility)
- A mental health provider (e.g., counselor)
- Legal personnel
- Someone in your chain of command
- A chaplain
- Law enforcement or criminal investigator
- Some other military individual/organization not listed above
- Some other civilian individual/organization not listed above
- Other
- Unable to recall

11. [Ask if Q9 = "A restricted report"] To whom did you make this initial restricted report? **Mark one.**

- A Sexual Assault Response Coordinator (SARC)
- A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)
- Healthcare personnel
- Other
- Unable to recall

12. [Ask if Q9 = "A restricted report"] Was your restricted report converted to an unrestricted report? *Mark one.*

- Yes, I chose to convert the restricted report to an unrestricted report
- No, I kept my restricted report but the matter was investigated and reported to the command without my participation
- No, it remained restricted
- Unable to recall

13. Did you talk to any of the following individuals or interact with any of the following service providers as a result of the sexual assault? *Mark "Yes" or "No" for each item.*

	No	Yes
a. [Ask if Q7 <> "Your unit commander/director"] Your unit commander/director	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
b. Your senior enlisted advisor (e.g., First or Master Sergeant, Chief Petty Officer)	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
c. Your immediate supervisor	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
d. [Ask if Q7 <> "A Sexual Assault Response Coordinator (SARC)" AND Q10 <> "A Sexual Assault Response Coordinator (SARC)" AND (Q11 <> "A Sexual Assault Response Coordinator (SARC)")] A Sexual Assault Response Coordinator (SARC).....	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
e. [Ask if Q7 <> "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" AND Q10 <> "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" AND Q11 <> "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)"] A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
f. [Ask if Q7 <> "A medical provider, not for mental health needs (e.g., someone from a military medical treatment facility or civilian treatment facility)" AND Q10 <> "A medical provider, not for mental health needs (e.g., someone from a military medical treatment facility or civilian treatment facility)"] A medical provider, not for mental health needs (e.g., someone from a military medical treatment facility or civilian treatment facility)	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
g. [Ask if Q7 <> "A mental health provider (e.g., counselor)" AND Q10 <> "A mental health provider (e.g., counselor)"] A mental health provider (e.g., counselor).....	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
h. [Ask if Q7 <> "Special Victims' Counsel or Victims' Legal Counsel (attorney assigned to you to represent your interests)"] Special Victims' Counsel or Victims' Legal Counsel (attorney assigned to you to represent your interests)	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

No
Yes

i. [Ask if Q7 <> "A chaplain" AND Q10 <> "A chaplain"] A chaplain

REPORTING EXPERIENCE

14. [Ask if Q7 = "A Sexual Assault Response Coordinator (SARC)" OR Q10 = "A Sexual Assault Response Coordinator (SARC)" OR Q11 = "A Sexual Assault Response Coordinator (SARC)" OR Q13 d = "Yes"] Thinking of your experience with the Sexual Assault Response Coordinator (SARC), how much do you agree or disagree with the following statements? *Mark one answer for each item.*

Not applicable	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. He/she supported you	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>				
b. He/she listened to you without judgment	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>				
c. He/she thoroughly answered your questions.	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>				
d. He/she treated you professionally	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>				
e. He/she advocated on your behalf, when needed.	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>				
f. He/she did not rush you to make decisions (e.g., what type of report to make or whether to seek medical treatment).	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>				

15. [Ask if Q7 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q10 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q11 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q13 e = "Yes"] You indicated that you interacted with a Uniformed Victim Advocate (UVA) or a Victim Advocate (VA). Was he/she a...

- Uniformed Victim Advocate (UVA)?
- Victim Advocate (VA)?
- Both a Uniformed Victim Advocate (UVA) and a Victim Advocate (VA)?
- Unable to recall?

16. [Ask if (Q7 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q10 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q11 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q13 e = "Yes") AND (Q15 = "Uniformed Victim Advocate (UVA)?" OR Q15 = "Both a Uniformed Victim Advocate (UVA) and Victim Advocate (VA)?")] Thinking of your experience with the Uniformed Victim Advocate (UVA), how much do you agree or disagree with the following statements? Mark one answer for each item.

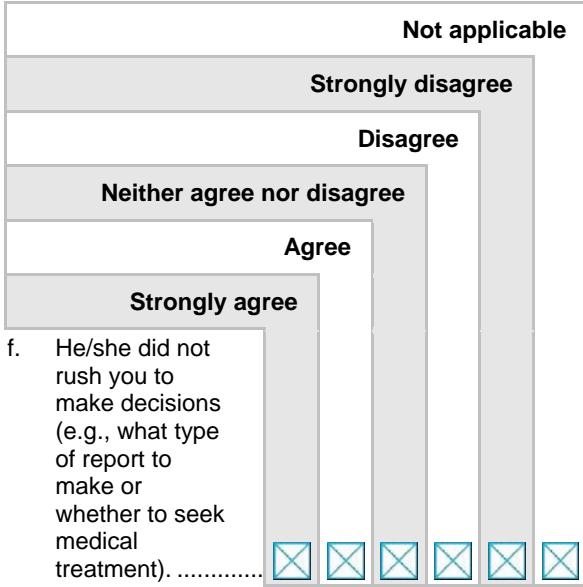
					Not applicable	
					Strongly disagree	
					Disagree	
					Neither agree nor disagree	
					Agree	
					Strongly agree	
a.	He/she supported you.....	<input checked="" type="checkbox"/>				
b.	He/she listened to you without judgment.....	<input checked="" type="checkbox"/>				
c.	He/she thoroughly answered your questions.....	<input checked="" type="checkbox"/>				
d.	He/she treated you professionally.....	<input checked="" type="checkbox"/>				
e.	He/she advocated on your behalf, when needed.....	<input checked="" type="checkbox"/>				

		Not applicable
		Strongly disagree
		Disagree
		Neither agree nor disagree
		Agree
		Strongly agree
f.	He/she did not rush you to make decisions (e.g., what type of report to make or whether to seek medical treatment).....	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

17. [Ask if (Q7 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q10 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q11 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q12 = "Yes") AND (Q15 = "Victim Advocate (VA)?" OR Q15 = "Both a Uniformed Victim Advocate (UVA) and Victim Advocate (VA)?"])

Thinking of your experience with the Victim Advocate (VA), how much do you agree or disagree with the following statements? Mark one answer for each item.

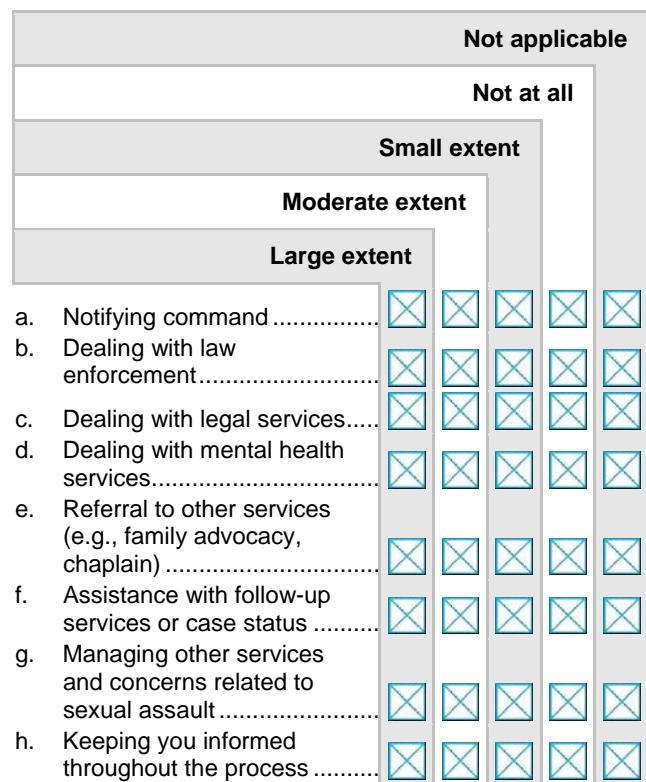
						Not applicable
						Strongly disagree
						Disagree
						Neither agree nor disagree
						Agree
						Strongly agree
a.	He/she supported you.....	<input checked="" type="checkbox"/>				
b.	He/she listened to you without judgment.	<input checked="" type="checkbox"/>				
c.	He/she thoroughly answered your questions.....	<input checked="" type="checkbox"/>				
d.	He/she treated you professionally.	<input checked="" type="checkbox"/>				
e.	He/she advocated on your behalf, when needed.	<input checked="" type="checkbox"/>				



18. [Ask if Q7 = "A Sexual Assault Response Coordinator (SARC)" OR Q7 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q10 = "A Sexual Assault Response Coordinator (SARC)" OR Q10 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q11 = "A Sexual Assault Response Coordinator (SARC)" OR Q11 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q13 d = "Yes" OR Q13 e = "Yes"] Did the Sexual Assault Response Coordinator (SARC) or the Uniformed Victim Advocate (UVA)/Victim Advocate (VA) accompany you to a clinic or hospital?

Yes
 No
 Not applicable

19. [Ask if Q7 = "A Sexual Assault Response Coordinator (SARC)" OR Q7 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q10 = "A Sexual Assault Response Coordinator (SARC)" OR Q10 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q11 = "A Sexual Assault Response Coordinator (SARC)" OR Q11 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q13 d = "Yes" OR Q13 e = "Yes"] Thinking about the overall assistance you received from your Sexual Assault Response Coordinator (SARC) or the Uniformed Victim Advocate (UVA)/Victim Advocate (VA), to what extent were you assisted with the following? Mark one answer for each item.



20. [Ask if Q7 = "A Sexual Assault Response Coordinator (SARC)" OR Q10 = "A Sexual Assault Response Coordinator (SARC)" OR Q11 = "A Sexual Assault Response Coordinator (SARC)" OR Q13 d = "Yes"] Overall, how satisfied are you with the services provided to you by the Sexual Assault Response Coordinator (SARC)?

Very satisfied
 Satisfied
 Neither satisfied nor dissatisfied
 Dissatisfied
 Very dissatisfied

21. [Ask if Q7 = "A Sexual Assault Response Coordinator (SARC)" OR Q10 = "A Sexual Assault Response Coordinator (SARC)" OR Q11 = "A Sexual Assault Response Coordinator (SARC)" OR Q13 d = "Yes"] If someone you know was sexually assaulted, how likely are you to recommend they meet with a Sexual Assault Response Coordinator (SARC)?

Very likely
 Likely
 Neither likely nor unlikely
 Unlikely
 Very unlikely

22. [Ask if (Q7 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q10 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q11 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q13 e = "Yes") AND (Q15 = "Uniformed Victim Advocate (UVA)?" OR Q15 = "Both a Uniformed Victim Advocate (UVA) and Victim Advocate (VA)?" Overall, how satisfied are you with the services provided to you by the Uniformed Victim Advocate (UVA)?)

Very satisfied
 Satisfied
 Neither satisfied nor dissatisfied
 Dissatisfied
 Very dissatisfied

23. [Ask if (Q7 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q10 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q11 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q13 e = "Yes") AND (Q15 = "Victim Advocate (VA)?" OR Q15 = "Both a Uniformed Victim Advocate (UVA) and Victim Advocate (VA)?" Overall, how satisfied are you with the services provided to you by the Victim Advocate (VA)?)

Very satisfied
 Satisfied
 Neither satisfied nor dissatisfied
 Dissatisfied
 Very dissatisfied

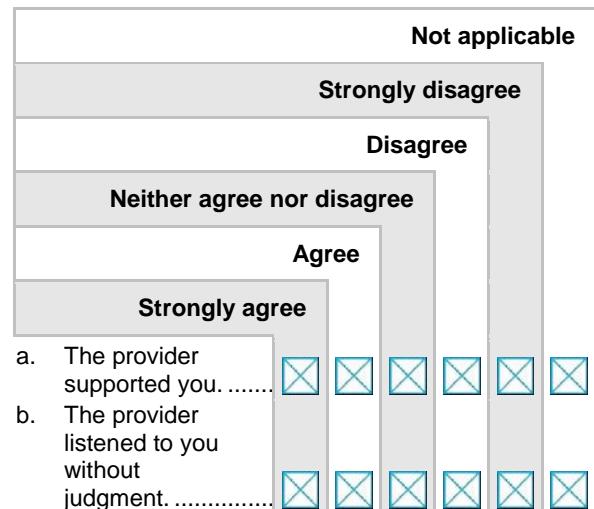
24. [Ask if Q7 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q10 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q11 = "A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)" OR Q13 e = "Yes"] If someone you know was sexually assaulted, how likely are you to recommend they meet with a Uniformed Victim Advocate (UVA) or Victim Advocate (VA)?

Very likely
 Likely
 Neither likely nor unlikely
 Unlikely
 Very unlikely

25. After the sexual assault, did you receive medical care? **Mark one.**

Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room
 Yes, at another military medical treatment facility (clinic, sick bay, etc.)
 Yes, at a civilian medical treatment facility (on or off post)
 No, I did not seek or want medical care
 No, I wanted medical care, but it was not available and/or offered

26. [Ask if Q25 = "Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room" OR Q25 = "Yes, at another military medical treatment facility (clinic, sick bay, etc.)" OR Q25 = "Yes, at a civilian medical treatment facility (on or off post)"] Thinking of the medical services you received for the sexual assault, how much do you agree or disagree with the following statements? **Mark one answer for each item.**



Not applicable						
Strongly disagree						
Disagree						
Neither agree nor disagree						
Agree						
Strongly agree						
c. The provider treated you professionally.....	<input checked="" type="checkbox"/>					
d. The provider thoroughly answered your questions.	<input checked="" type="checkbox"/>					
e. The medical exam was appropriate for the reason for your visit.	<input checked="" type="checkbox"/>					
f. The provider maintained your confidentiality.	<input checked="" type="checkbox"/>					
g. The provider explained the steps in the exam to you.	<input checked="" type="checkbox"/>					
h. The provider did not rush you to make decisions (e.g., to receive a Sexual Assault Forensic Examination [SAFE])......	<input checked="" type="checkbox"/>					

27. [Ask if Q25 = "Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room" OR Q25 = "Yes, at another military medical treatment facility (clinic, sick bay, etc.)" OR Q25 = "Yes, at a civilian medical treatment facility (on or off post)"] **Thinking of the medical services you received for the sexual assault, to what extent were you provided with the following? Mark one answer for each item.**

Not applicable						
Not at all						
Small extent						
Moderate extent						
Large extent						
c. Necessary items/care (e.g., replacement clothing, toiletries)	<input checked="" type="checkbox"/>					

28. [Ask if Q25 = "Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room" OR Q25 = "Yes, at another military medical treatment facility (clinic, sick bay, etc.)" OR Q25 = "Yes, at a civilian medical treatment facility (on or off post)"] **As part of your medical visit(s), did you receive care for a medical (physical) injury that occurred during the assault?**

- Yes, I received this care on base
- Yes, I received this care off base
- No
- Unable to recall

29. [Ask if Q25 = "Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room" OR Q25 = "Yes, at another military medical treatment facility (clinic, sick bay, etc.)" OR Q25 = "Yes, at a civilian medical treatment facility (on or off post)"] **As part of your medical visit(s), did you receive a Sexual Assault Forensic Examination (SAFE) for evidence collection?**

- Yes, I received this exam on base
- Yes, I received this exam off base
- No
- Unable to recall

Not applicable						
Not at all						
Small extent						
Moderate extent						
Large extent						
a. Information on health options	<input checked="" type="checkbox"/>					
b. Adequate follow-up care	<input checked="" type="checkbox"/>					

30. [Ask if (Q25 = "Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room" OR Q25 = "Yes, at another military medical treatment facility (clinic, sick bay, etc.)" OR Q25 = "Yes, at a civilian medical treatment facility (on or off post)") AND Q29 = "No"] **Why did you not receive a Sexual Assault Forensic Examination (SAFE) for evidence collection?**

- I was not offered an examination.
- I declined the examination.
- It was explained to me that my medical visit occurred outside of the required time frame to receive this examination.
- Prefer not to answer

31. [Ask if Q25 = "Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room" OR Q25 = "Yes, at another military medical treatment facility (clinic, sick bay, etc.)" OR Q25 = "Yes, at a civilian medical treatment facility (on or off post)"] **In general, did you get all of the medical care you requested?**

- Yes
- No
- Not applicable

32. [Ask if Q25 = "Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room" OR Q25 = "Yes, at another military medical treatment facility (clinic, sick bay, etc.)" OR Q25 = "Yes, at a civilian medical treatment facility (on or off post)"] **Overall, how satisfied are you with the medical services you received for the sexual assault?**

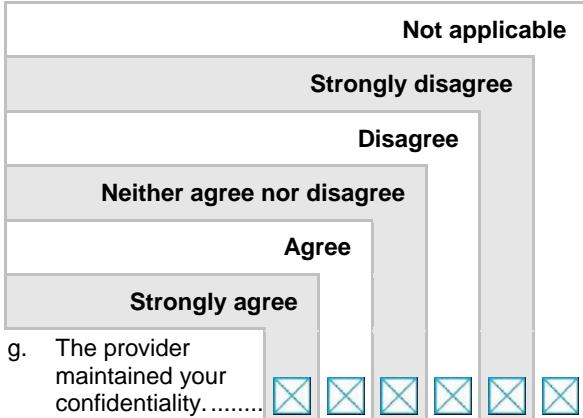
- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

33. **After the sexual assault, did you receive mental health care (e.g., counseling)?**

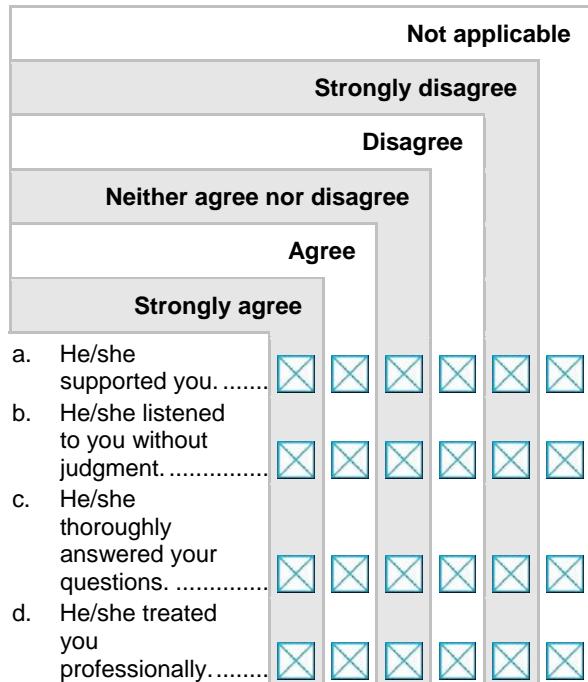
- Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room
- Yes, at another military mental health treatment facility (clinic, sick bay, etc.)
- Yes, at a civilian mental health treatment facility (on or off post)
- No, I did not seek or want mental health care
- No, I wanted mental health care, but it was not available and/or offered

34. [Ask if Q33 = "Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room" OR Q33 = "Yes, at another military mental health treatment facility (clinic, sick bay, etc.)" OR Q33 = "Yes, at a civilian mental health treatment facility (on or off post)"] **Thinking of the mental health services you received for the sexual assault, how much do you agree or disagree with the following statements? Mark one answer for each item.**

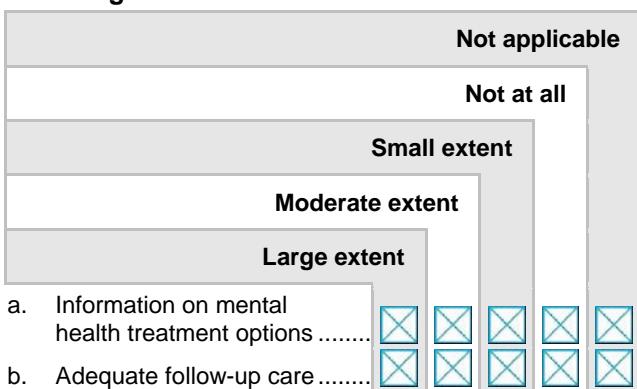
Not applicable						
Strongly disagree						
Disagree						
Neither agree nor disagree						
Agree						
Strongly agree						
a.	The provider supported you.....	<input checked="" type="checkbox"/>				
b.	The provider listened to you without judgment.....	<input checked="" type="checkbox"/>				
c.	The provider treated you professionally.....	<input checked="" type="checkbox"/>				
d.	The provider thoroughly answered your questions.....	<input checked="" type="checkbox"/>				
e.	The provider seemed knowledgeable about dealing with sexual assault in the military.....	<input checked="" type="checkbox"/>				
f.	The provider's questions were appropriate for the reason for your visit.....	<input checked="" type="checkbox"/>				



37. [Ask if Q7 = "Special Victims' Counsel or Victims' Legal Counsel (attorney assigned to you to represent your interests)" OR Q13 h = "Yes"] Thinking of your experience with the Special Victims' Counsel or Victims' Legal Counsel, how much do you agree or disagree with the following statements? **Mark one answer for each item.**



35. [Ask if Q33 = "Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room" OR Q33 = "Yes, at another military mental health treatment facility (clinic, sick bay, etc.)" OR Q33 = "Yes, at a civilian mental health treatment facility (on or off post)"] Thinking of the mental health services you received for the sexual assault, to what extent were you provided with the following? **Mark one answer for each item.**



36. [Ask if Q33 = "Yes, at a military hospital or medical center (of any military Service) that has a 24/7 emergency room" OR Q33 = "Yes, at another military mental health treatment facility (clinic, sick bay, etc.)" OR Q33 = "Yes, at a civilian mental health treatment facility (on or off post)"] Overall, how satisfied are you with the mental health services you received for the sexual assault?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

39. [Ask if Q7 = "A chaplain" OR Q10 = "A chaplain" OR Q13 i = "Yes"] Thinking of your experience with the chaplain related to the sexual assault, how much do you agree or disagree with the following statements? *Mark one answer for each item.*

Not applicable						
Strongly disagree						
Disagree						
Neither agree nor disagree						
Agree						
Strongly agree						
a. He/she supported you.....	<input checked="" type="checkbox"/>					
b. He/she listened to you without judgment.....	<input checked="" type="checkbox"/>					
c. He/she thoroughly answered your questions.....	<input checked="" type="checkbox"/>					
d. He/she treated you professionally.....	<input checked="" type="checkbox"/>					
e. He/she maintained your confidentiality.....	<input checked="" type="checkbox"/>					

40. [Ask if Q7 = "A chaplain" OR Q10 = "A chaplain" OR Q13 i = "Yes"] Overall, how satisfied are you with the services provided to you by the chaplain?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

41. [Ask if Q7 = "Your unit commander/director" OR Q13 a = "Yes"] Thinking of your unit commander's response to your report of the sexual assault, how much do you agree or disagree with the following statements? *Mark one answer for each item.*

Not applicable						
Strongly disagree						
Disagree						
Neither agree nor disagree						
Agree						
Strongly agree						
a. He/she supported you.....	<input checked="" type="checkbox"/>					
b. He/she listened to you without judgment.....	<input checked="" type="checkbox"/>					
c. He/she thoroughly answered your questions.....	<input checked="" type="checkbox"/>					
d. He/she treated you professionally.....	<input checked="" type="checkbox"/>					
e. He/she took steps to address your privacy and confidentiality.....	<input checked="" type="checkbox"/>					

42. [Ask if Q7 = "Your unit commander/director" OR Q13 a = "Yes"] Overall, how satisfied are you with your unit commander's response to the sexual assault?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

43. [Ask if Q7 = "Another member in your chain of command (e.g., your immediate supervisor, First Sergeant)" OR Q10 = "Someone in your chain of command" OR Q13 b = "Yes" OR Q13 c = "Yes"] Thinking of your command's (e.g., your senior enlisted advisor, your immediate supervisor) overall response to your report of the sexual assault, how much do you agree or disagree with the following statements? *Mark one answer for each item.*

Not applicable					
Strongly disagree					
Disagree					
Neither agree nor disagree					
Agree					
Strongly agree					
a. They supported you.....	<input checked="" type="checkbox"/>				
b. They listened to you without judgment.....	<input checked="" type="checkbox"/>				
c. They thoroughly answered your questions.....	<input checked="" type="checkbox"/>				
d. They treated you professionally.....	<input checked="" type="checkbox"/>				
e. They took steps to address your privacy and confidentiality.....	<input checked="" type="checkbox"/>				

45. Thinking about all the resources or services you used after reporting, to what extent were you provided with the following? *Mark one answer for each item.*

Not applicable					
Not at all					
Small extent					
Moderate extent					
Large extent					
a. Safety planning information regarding your immediate situation (e.g., steps to take should the offender try to contact you, information regarding a Military Protection Order and/or a Civilian Protection Order, risk assessment)	<input checked="" type="checkbox"/>				
b. Accurate up-to-date information on your case status	<input checked="" type="checkbox"/>				
c. Information to address your confidentiality concerns (e.g., your right to privacy)	<input checked="" type="checkbox"/>				
d. Information on reporting options that were available to you	<input checked="" type="checkbox"/>				
e. Regular contact regarding your well-being (e.g., your Sexual Assault Response Coordinator [SARC] or Uniformed Victim Advocate [UVA]/Victim Advocate [VA] checked in with you to address any new concerns, case management, referrals).....	<input checked="" type="checkbox"/>				
f. Information on your right to consult a Special Victims' Counsel or Victims' Legal Counsel.....	<input checked="" type="checkbox"/>				
g. Information on your right to request an expedited transfer.....	<input checked="" type="checkbox"/>				
h. Information about Victim's Rights (VWAP - DD Form 2701).....	<input checked="" type="checkbox"/>				

44. [Ask if Q7 = "Another member in your chain of command (e.g., your immediate supervisor, First Sergeant)" OR Q10 = "Someone in your chain of command" OR Q13 b = "Yes" OR Q13 c = "Yes"] Overall, how satisfied are you with your command's (e.g., your senior enlisted advisor, your immediate supervisor) response to the sexual assault?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

GENERAL EXPERIENCES

46. Thinking about your overall needs during this process, how important were the following to you? *Mark one answer for each item.*

	Not applicable	Very unimportant	Unimportant	Neither important nor unimportant	Important	Very important
a. Medical services and treatment.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mental health/ counseling services.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Maintaining a sense of privacy.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Legal support.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Peer/coworker support.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Command support.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Support in the investigation process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Being informed of the military justice process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Support in managing duty responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Safety.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Being able to have a say in issues related to the sexual assault	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Some other need.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

47. Since you reported the sexual assault, to what extent has the following occurred? *Mark one answer for each item.*

	Not applicable	Large extent	Moderate extent	Small extent	Not at all
a. You experienced <u>professional retaliation</u> (e.g., loss of privileges, denied promotion/training, transferred to less favorable job, unwanted increased supervision).....	<input type="checkbox"/>				
b. You experienced <u>social retaliation</u> (e.g., ignored by coworkers, blamed for the situation, made to feel responsible for changes in the unit).....	<input type="checkbox"/>				

48. Were you deployed to a remote location when you were sexually assaulted (e.g., on a ship or in a combat zone)?

Yes
 No
 Unable to recall

49. Based on your overall experience of the reporting process and services, would you recommend that others report their sexual assault?

Yes
 No
 Unsure

ARMY

50. [Ask if (Q3 = "Army" OR Q3 = "Army Reserve") AND (Q47 b = "Small extent" OR Q47 b = "Moderate extent" OR Q47 b = "Large extent")] You previously reported experiencing some sort of social retaliation since you reported your sexual assault. Was any of the retaliation you experienced via social media (e.g., Facebook, texting, Twitter)?

Yes
 No

NATIONAL GUARD

51. [Ask if Q3 = "Army National Guard" OR Q3 = "Air National Guard"] **Were you in a duty or drill status at the time of the assault?**

- Yes
- No
- Unable to recall

52. [Ask if (Q3 = "Army National Guard" OR Q3 = "Air National Guard") AND Q51 = "Yes"] **Were you given the option of obtaining a Line of Duty (LOD) to cover medical expenses?**

- Yes
- No
- Unable to recall

53. [Ask if (Q3 = "Army National Guard" OR Q3 = "Air National Guard") AND Q51 = "No"] **Were you offered referrals to civilian victim advocacy resources?**

- Yes
- No
- Unable to recall

54. [Ask if Q3 = "Army National Guard" OR Q3 = "Air National Guard"] **Did you have any concerns about whether or not a Victim Advocate (VA) within your own unit would maintain confidentiality?**

- Yes
- No

55. [Ask if (Q3 = "Army National Guard" OR Q3 = "Air National Guard") AND Q54 = "Yes"] **Did you express those concerns to your Sexual Assault Response Coordinator (SARC)?**

- Yes
- No
- Unable to recall

56. [Ask if (Q3 = "Army National Guard" OR Q3 = "Air National Guard") AND Q54 = "Yes"] **Were you offered the opportunity to have a Victim Advocate (VA) from a different unit or National Guard service?**

- Yes
- No
- Unable to recall

MARINE CORPS: INSTALLATION 24/7 HELPLINE

The Marine Corps has some additional questions about the services you used and your experiences.

57. [Ask if Q3 = "Marine Corps" OR Q3 = "Marine Corps Reserve"] **Did you use your installation 24/7 Helpline?**

- Yes
- No
- Unable to recall

58. [Ask if (Q3 = "Marine Corps" OR Q3 = "Marine Corps Reserve") AND Q57 = "Yes"] **How satisfied were you with the services provided by the 24/7 Helpline overall?**

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

MARINE CORPS: RESTRICTED REPORT

59. [Ask if (Q3 = "Marine Corps" OR Q3 = "Marine Corps Reserve") AND Q9 = "A restricted report"] **What were your reasons for making an initial restricted report? *Mark all that apply.***

- I did not want my chain of command to know.
- I did not want other people in my unit to find out I was assaulted.
- I did not want to go through an investigation.
- I did not want to appear in court.
- I did not want the perpetrator to get in trouble.
- I wanted access to mental health services.
- I wanted access to medical services.
- I felt pressured to.
- Other
- Don't know

MARINE CORPS: UNRESTRICTED REPORT

60. [Ask if (Q3 = "Marine Corps" OR Q3 = "Marine Corps Reserve") AND Q9 = "An unrestricted report"] **What were your reasons for making an initial unrestricted report? Mark all that apply.**

- I wanted the support of my chain of command.
- I wanted the perpetrator to be investigated.
- I wanted to hold the perpetrator accountable.
- I wanted to be heard in court.
- I felt pressured to.
- I was not given a choice.
- Other
- Don't know

61. [Ask if (Q3 = "Marine Corps" OR Q3 = "Marine Corps Reserve") AND (Q9 = "An unrestricted report" OR (Q9 = "A restricted report" AND Q12 = "Yes, I chose to convert the restricted report to an unrestricted report"))] **If you made an unrestricted report but then declined to participate in the investigation or to appear in court, select the statements that best apply to your situation. Mark all that apply.**

- Not applicable, I did participate throughout the entire process.
- I did not want to participate in an investigation.
- The investigation was/would have been too emotionally difficult.
- The investigation took too much time.
- I did not want to appear in court.
- Appearing in court was/would have been too emotionally difficult.
- The court process took too much time.
- I changed my mind about filing an unrestricted report.
- I was not given the choice to file a restricted report.
- Other

TAKING THE SURVEY

62. [Ask if Q1 = "No, I have separated or retired" OR Q2 = "Under 18 years old"] **Based on your answer to the previous question(s), you are ineligible to take this survey. To be eligible, you must currently be a uniformed military member and 18 years old or older. If you feel you have encountered this message in error, click the back arrow button and check your answer(s).**

To submit your answers click *Submit*. For further help, please call our Survey Processing Center toll-free at 1-800-881-5307, or e-mail DODHRA.SES-Survey@mail.mil.

Appendix B.
Questionnaire-Specific Service Text

Questionnaire-Specific Service Text

2014 SES used dynamic text to present Service-specific terms to. The tables below indicate the text presented to respondents by Service.

Table B-1.
Questionnaire Service-Specific Text

Question text with default text	Services/Reserve Components				
	Army or Army Reserve	Navy or Navy Reserve	Marine Corps or Marine Corps Reserve	Air Force or Air Force Reserve	Army National Guard or Air National Guard
<p>6. Prior to the sexual assault, were you aware of the following resources? Mark one answer for each item. If the resource did not exist at the time of your assault, mark "Did not exist".</p> <p>Did not exist</p> <p>No</p> <p>Yes</p> <p>b. Uniformed Victim Advocate (UVA) or Victim Advocate (VA)..... <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/></p>	SHARP Victim Advocate (VA)	Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA) or Volunteer Victim Advocate (VVA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA) or Volunteer Victim Advocate (VVA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)
<p>7. Who did you <u>first</u> tell about the sexual assault? Mark one.</p> <p><input checked="" type="checkbox"/> A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)</p>	SHARP Victim Advocate (VA)	Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA) or Volunteer Victim Advocate (VVA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA) or Volunteer Victim Advocate (VVA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)

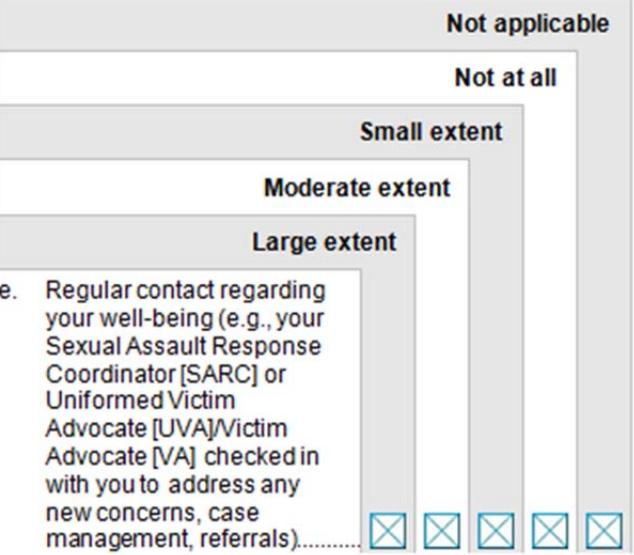
Question text with default text	Services/Reserve Components				
8. Did the individual you <u>first</u> spoke to advise you to contact a Sexual Assault Response Coordinator (SARC) or a Uniformed Victim Advocate (UVA)/Victim Advocate (VA)?	SHARP Victim Advocate (VA)	Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA)/ Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Uniformed Victim Advocate (UVA)/ Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)/Volunteer Victim Advocate (VVA)	Uniformed Victim Advocate (UVA)/ Sexual Assault Prevention and Response Victim Advocate (SAPR VA)
10. To whom did you make this <u>initial</u> unrestricted report? Mark one. <input checked="" type="checkbox"/> A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)	SHARP Victim Advocate (VA)	Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA) or Volunteer Victim Advocate (VVA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)
11. To whom did you make this <u>initial</u> restricted report? Mark one. <input checked="" type="checkbox"/> A Uniformed Victim Advocate (UVA) or Victim Advocate (VA)	SHARP Victim Advocate (VA)	Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA) or Volunteer Victim Advocate (VVA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)

Question text with default text	Services/Reserve Components				
<p>13. Did you talk to any of the following individuals or interact with any of the following service providers as a result of the sexual assault? Mark "Yes" or "No" for each item.</p> <div style="border: 1px solid #ccc; padding: 5px; text-align: center;"> No Yes </div> <p>e. A Uniformed Victim Advocate (UVA) or Victim Advocate (VA).....</p> <div style="border: 1px solid #ccc; padding: 2px 10px; display: inline-block;"> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> </div>	SHARP Victim Advocate (VA)	Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA) or Volunteer Victim Advocate (VVA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)

Question text with default text	Services/Reserve Components				
<p>15. You indicated that you interacted with a Uniformed Victim Advocate (UVA) or a Victim Advocate (VA). Was he/she a...</p> <p><input checked="" type="checkbox"/> Uniformed Victim Advocate (UVA)?</p> <p><input checked="" type="checkbox"/> Victim Advocate (VA)?</p> <p><input checked="" type="checkbox"/> Both a Uniformed Victim Advocate (UVA) and Victim Advocate (VA)?</p> <p><input checked="" type="checkbox"/> Unable to recall?</p>	<p>You indicated that you interacted with a SHARP Victim Advocate (VA). Was he/she a...</p> <p>[] Uniformed Victim Advocate (UVA)?</p> <p>[] Victim Advocate (VA)?</p> <p>[] Both a Uniformed Victim Advocate (UVA) and Victim Advocate (VA)?</p> <p>[] Unable to recall</p>	<p>You indicated that you interacted with a Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA) or a Sexual Assault Prevention and Response Victim Advocate (SAPR VA). Was he/she a...</p> <p>[] Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA)?</p> <p>[] Sexual Assault Prevention and Response Victim Advocate (SAPR VA)?</p> <p>[] Both a Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA) and Sexual Assault Prevention and Response Victim Advocate (SAPR VA)?</p> <p>[] Unable to recall</p>	<p>You indicated that you interacted with a Uniformed Victim Advocate (UVA) or a Sexual Assault Prevention and Response Victim Advocate (SAPR VA) or a Volunteer Victim Advocate (VVA). Was he/she a...</p> <p>[] Uniformed Victim Advocate (UVA)?</p> <p>[] Sexual Assault Prevention and Response Victim Advocate (SAPR VA)?</p> <p>[] Both a Uniformed Victim Advocate (UVA) and Sexual Assault Prevention and Response Victim Advocate (SAPR VA)?</p> <p>[] Unable to recall</p>	<p>You indicated that you interacted with a Sexual Assault Prevention and Response Victim Advocate (SAPR VA) or a Volunteer Victim Advocate (VVA). Was he/she a...</p> <p>[] Sexual Assault Prevention and Response Victim Advocate (SAPR VA)?</p> <p>[] Both a Sexual Assault Prevention and Response Victim Advocate (SAPR VA) and Volunteer Victim Advocate (VVA)?</p> <p>[] Unable to recall</p>	<p>You indicated that you interacted with a Uniformed Victim Advocate (UVA) or a Sexual Assault Prevention and Response Victim Advocate (SAPR VA). Was he/she a...</p> <p>[] Uniformed Victim Advocate (UVA)?</p> <p>[] Sexual Assault Prevention and Response Victim Advocate (SAPR VA)?</p> <p>[] Both a Uniformed Victim Advocate (UVA) and Sexual Assault Prevention and Response Victim Advocate (SAPR VA)?</p> <p>[] Unable to recall</p>

Question text with default text	Services/Reserve Components				
16. Thinking of your experience with the Uniformed Victim Advocate (UVA), how much do you agree or disagree with the following statements? <i>Mark one answer for each item.</i>	Uniformed Victim Advocate (UVA)	Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA)	Uniformed Victim Advocate (UVA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Uniformed Victim Advocate (UVA)
17. Thinking of your experience with the Victim Advocate (VA), how much do you agree or disagree with the following statements? <i>Mark one answer for each item.</i>	Victim Advocate (VA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Volunteer Victim Advocate (VVA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)
18. Did the Sexual Assault Response Coordinator (SARC) or the Uniformed Victim Advocate (UVA)/Victim Advocate (VA) accompany you to a clinic or hospital?	Uniformed Victim Advocate (UVA)/Victim Advocate (VA)	Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA)/Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Uniformed Victim Advocate (UVA)/Sexual Assault Prevention and Response Victim Advocate (SAPR VA)/Volunteer Victim Advocate (VVA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)/Volunteer Victim Advocate (VVA)	Uniformed Victim Advocate (UVA)/Sexual Assault Prevention and Response Victim Advocate (SAPR VA)
19. Thinking about the overall assistance you received from your Sexual Assault Response Coordinator (SARC) or the Uniformed Victim Advocate (UVA)/Victim Advocate (VA), to what extent were you assisted with the following? <i>Mark one answer for each item.</i>	Uniformed Victim Advocate (UVA)/Victim Advocate (VA)	Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA)/Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Uniformed Victim Advocate (UVA)/Sexual Assault Prevention and Response Victim Advocate (SAPR VA)/Volunteer Victim Advocate (VVA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)/Volunteer Victim Advocate (VVA)	Uniformed Victim Advocate (UVA)/Sexual Assault Prevention and Response Victim Advocate (SAPR VA)

Question text with default text	Services/Reserve Components				
22. Overall, how satisfied are you with the services provided to you by the <u>Uniformed Victim Advocate (UVA)</u> ?	Uniformed Victim Advocate (UVA)	Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA)	Uniformed Victim Advocate (UVA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Uniformed Victim Advocate (UVA)
23. Overall, how satisfied are you with the services provided to you by the <u>Victim Advocate (VA)</u> ?	Victim Advocate (VA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Volunteer Victim Advocate (VVA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)
24. If someone you know was sexually assaulted, how likely are you to recommend they meet with a <u>Uniformed Victim Advocate (UVA)</u> or <u>Victim Advocate (VA)</u> ?	Uniformed Victim Advocate (UVA) or Victim Advocate (VA)	Unit Sexual Assault Prevention and Response Victim Advocate (Unit SAPR VA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA) or Volunteer Victim Advocate (VVA)	Sexual Assault Prevention and Response Victim Advocate (SAPR VA) or Volunteer Victim Advocate (VVA)	Uniformed Victim Advocate (UVA) or Sexual Assault Prevention and Response Victim Advocate (SAPR VA)

Question text with default text	Services/Reserve Components				
<p>45. Thinking about all the resources or services you used after reporting, to what extent were you provided with the following? Mark one answer for each item.</p> <p style="text-align: center;">Not applicable</p> <p style="text-align: center;">Not at all</p> <p style="text-align: center;">Small extent</p> <p style="text-align: center;">Moderate extent</p> <p style="text-align: center;">Large extent</p> <p>e. Regular contact regarding your well-being (e.g., your Sexual Assault Response Coordinator [SARC] or Uniformed Victim Advocate [UVA]/Victim Advocate [VA] checked in with you to address any new concerns, case management, referrals).....</p>  <p><input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/></p>	Uniformed Victim Advocate [UVA]/Victim Advocate [VA]	Unit Sexual Assault Prevention and Response Victim Advocate [Unit SAPR VA]/Sexual Assault Prevention and Response Victim Advocate [SAPR VA]	Uniformed Victim Advocate [UVA]/Sexual Assault Prevention and Response Victim Advocate [SAPR VA]	Sexual Assault Prevention and Response Victim Advocate [SAPR VA]/Volunteer Victim Advocate [VVA]	Uniformed Victim Advocate [UVA]/Sexual Assault Prevention and Response Victim Advocate [SAPR VA]
<p>54. [Ask if Q3 = "Army National Guard" OR Q3 = "Air National Guard"] Did you have any concerns about whether or not a Victim Advocate (VA) within your own unit would maintain confidentiality?</p> <p><input checked="" type="checkbox"/> Yes</p> <p><input checked="" type="checkbox"/> No</p>	Not applicable per skip	Not applicable per skip	Not applicable per skip	Not applicable per skip	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)

Question text with default text	Services/Reserve Components				
<p>56. [Ask if (Q3 = "Army National Guard" OR Q3 = "Air National Guard") AND Q54 = "Yes"] Were you offered the opportunity to have a Victim Advocate (VA) from a different unit or National Guard service?</p> <p><input checked="" type="checkbox"/> Yes</p> <p><input checked="" type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Unable to recall</p>	Not applicable per skip	Not applicable per skip	Not applicable per skip	Not applicable per skip	Sexual Assault Prevention and Response Victim Advocate (SAPR VA)

REPORT DOCUMENTATION PAGE
*Form Approved
OMB No. 0704-0188*

The public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0704-0188), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ADDRESS.

1. REPORT DATE (DD-MM-YYYY)				2. REPORT TYPE	3. DATES COVERED (From - To)	
4. TITLE AND SUBTITLE				5a. CONTRACT NUMBER		
				5b. GRANT NUMBER		
				5c. PROGRAM ELEMENT NUMBER		
6. AUTHOR(S)				5d. PROJECT NUMBER		
				5e. TASK NUMBER		
				5f. WORK UNIT NUMBER		
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES)					8. PERFORMING ORGANIZATION REPORT NUMBER	
9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(ES)					10. SPONSOR/MONITOR'S ACRONYM(S)	
					11. SPONSOR/MONITOR'S REPORT NUMBER(S)	
12. DISTRIBUTION/AVAILABILITY STATEMENT						
13. SUPPLEMENTARY NOTES						
14. ABSTRACT						
15. SUBJECT TERMS						
16. SECURITY CLASSIFICATION OF: a. REPORT b. ABSTRACT c. THIS PAGE			17. LIMITATION OF ABSTRACT	18. NUMBER OF PAGES	19a. NAME OF RESPONSIBLE PERSON 19b. TELEPHONE NUMBER (Include area code)	

INSTRUCTIONS FOR COMPLETING SF 298

- 1. REPORT DATE.** Full publication date, including day, month, if available. Must cite at least the year and be Year 2000 compliant, e.g. 30-06-1998; xx-06-1998; xx-xx-1998.
- 2. REPORT TYPE.** State the type of report, such as final, technical, interim, memorandum, master's thesis, progress, quarterly, research, special, group study, etc.
- 3. DATES COVERED.** Indicate the time during which the work was performed and the report was written, e.g., Jun 1997 - Jun 1998; 1-10 Jun 1996; May - Nov 1998; Nov 1998.
- 4. TITLE.** Enter title and subtitle with volume number and part number, if applicable. On classified documents, enter the title classification in parentheses.
- 5a. CONTRACT NUMBER.** Enter all contract numbers as they appear in the report, e.g. F33615-86-C-5169.
- 5b. GRANT NUMBER.** Enter all grant numbers as they appear in the report, e.g. AFOSR-82-1234.
- 5c. PROGRAM ELEMENT NUMBER.** Enter all program element numbers as they appear in the report, e.g. 61101A.
- 5d. PROJECT NUMBER.** Enter all project numbers as they appear in the report, e.g. 1F665702D1257; ILIR.
- 5e. TASK NUMBER.** Enter all task numbers as they appear in the report, e.g. 05; RF0330201; T4112.
- 5f. WORK UNIT NUMBER.** Enter all work unit numbers as they appear in the report, e.g. 001; AFAPL30480105.
- 6. AUTHOR(S).** Enter name(s) of person(s) responsible for writing the report, performing the research, or credited with the content of the report. The form of entry is the last name, first name, middle initial, and additional qualifiers separated by commas, e.g. Smith, Richard, J, Jr.
- 7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES).** Self-explanatory.
- 8. PERFORMING ORGANIZATION REPORT NUMBER.** Enter all unique alphanumeric report numbers assigned by the performing organization, e.g. BRL-1234; AFWL-TR-85-4017-Vol-21-PT-2.
- 9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(ES).** Enter the name and address of the organization(s) financially responsible for and monitoring the work.
- 10. SPONSOR/MONITOR'S ACRONYM(S).** Enter, if available, e.g. BRL, ARDEC, NADC.
- 11. SPONSOR/MONITOR'S REPORT NUMBER(S).** Enter report number as assigned by the sponsoring/monitoring agency, if available, e.g. BRL-TR-829; -215.
- 12. DISTRIBUTION/AVAILABILITY STATEMENT.** Use agency-mandated availability statements to indicate the public availability or distribution limitations of the report. If additional limitations/ restrictions or special markings are indicated, follow agency authorization procedures, e.g. RD/FRD, PROPIN, ITAR, etc. Include copyright information.
- 13. SUPPLEMENTARY NOTES.** Enter information not included elsewhere such as: prepared in cooperation with; translation of; report supersedes; old edition number, etc.
- 14. ABSTRACT.** A brief (approximately 200 words) factual summary of the most significant information.
- 15. SUBJECT TERMS.** Key words or phrases identifying major concepts in the report.
- 16. SECURITY CLASSIFICATION.** Enter security classification in accordance with security classification regulations, e.g. U, C, S, etc. If this form contains classified information, stamp classification level on the top and bottom of this page.
- 17. LIMITATION OF ABSTRACT.** This block must be completed to assign a distribution limitation to the abstract. Enter UU (Unclassified Unlimited) or SAR (Same as Report). An entry in this block is necessary if the abstract is to be limited.



Defense Research, Surveys, and Statistics Center (RSSC)



